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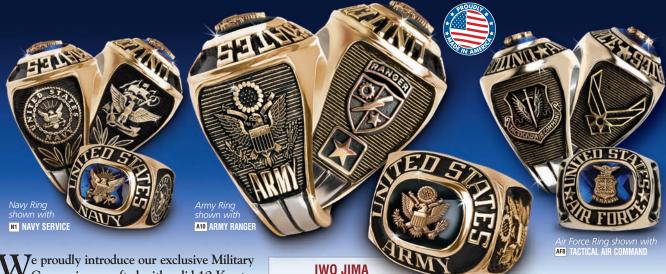
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ON THE COVER

A soldier stands before a wreath at the Tomb of the Unknowns after Memorial Day ceremonies at Arlington National Cemetery on May 26, 2014. DoD/EJ Hersom

22 More Than Names

Janie Schaut hopes her personal histories for veterans of her community will inspire similar work nationwide. By Ken Olsen

30 America at War

A chronology of U.S. military interventions and the prices paid. By Alan W. Dowd

40 Our Fabricated Future

The 3D printing revolution will transform how we live and how we fight. By Hod Lipson and Melba Kurman

50 Leadership: America's Missing Ingredient

We need a return to integrity, selflessness and the instinct to protect freedom's principles.

By Tommy Franks and Thomas N. Wheatley

52 'Why Memorial Day'

For Oliver Wendell Holmes Jr., speaking to his fellow Civil War veterans in 1884, the day "solemnly reaffirms from year to year a national act of enthusiasm and faith."

- 5 Vet Voice
- 8 Commander's Message
- 10 I Am The American Legion
- 12 Living Well

- 18 Big Issues
- 20 Veterans Update
- 60 Rapid Fire
- 76 Comrades
- **80** Parting Shots

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'Top of the World'

I enjoyed Mark Seavey's article about Thule Air Base (March). I did two 12-month tours up at the top of the world: 1983 to 1984, and 1987 to 1988.

I loved Greenland. I worked up on the mountain as a security policeman. We only had about 600 people assigned there, so it was almost like a family. I got to climb Mount Dundas a few times and play golf on top of it – yes, there really is a golf course there. I had the opportunity to visit some of the old Nike missile sites and watch polar bears swim Wolstemholme Fjord among the icebergs. As far as light goes, the 24 hours of daylight messed me up worse than 24 hours of no sun. It was a great adventure that I'll never forget.

– Jeffrey P. Hunt, Harpursville, N.Y.

This article brought back a flood of memories. In the early '50s I was stationed at Dow Air Force Base in Maine, assigned to the 341st Air Refueling Squadron as an aircraft mechanic. I recall vividly three temporary duty tours at Thule and the almost impossible weather conditions in which we had to ensure that our aircraft was operational at all times. The weather was so dangerous that we were required to work on the exterior of our aircraft in pairs to prevent falling asleep, which would have quickly brought death from freezing. The winds were of a velocity that although our tanker was tied down, its nose would have constantly been lifting off the ground if not for the tail stand.

- Sal Neri, Valencia, Calif.

My daughter, Carla, was stationed at Thule in 1987-1989. She was a Air Force chaplain's assistant, and she told us of having lunch with the queen of Denmark and 500 other officers and NCOs. It was good to hear a little bit of Thule's history, even after all these years.

- Benjamin F. Harrison, Hemet, Calif.

My father, Laurel Barrow, was among the first to go to Thule, as a civilian contractor. He would work for nine months and come home for three. What a joy it was for me to listen to his stories of the frozen north and experiences with the natives. He was able to go on a seal hunt and polar bear hunt. I have the patch from Project Blue Jay. I am now 80, but what a thrill to be able to recall my dad's experience at Thule.

– Pauline Martin, Luverne, Minn.

From 1953 until 1972, the Coast Guard operated a LORAN station at Cape Atholl. This navigational aid station was located on the coast about 40 miles from Thule and was manned by about 19 Coast Guardsmen. The station was supplied from Thule by helicopter, and crew members would occasionally get a weekend liberty at the air base. They froze, too, and like so many Coasties at isolated LORAN facilities scattered around the world, they served with little or no recognition for the contribution they made.

– Joe Maguire, Elmwood Park, N.J.

'Truth or Consequences'

In regard to Alan W. Dowd's article (March) suggesting that we as a nation must choose between national security and Social Security – this is simply not true. We easily could afford both if we sought to end Congress' use of Social Security as its own IOU-based piggy bank to fund special projects, and ceased all eligibility for Social Security and Medicaid for undocumented immigrants (billions every year). Illegal means breaking the law, and that should not be rewarded.

Finally, aiding friendly nations is always prudent, but billions exported to places that likely harbor hatred toward us is bad strategy and very costly. If we quit being reckless, we would have an adequate military to confront threats and be able to provide for every disabled, retired or elderly citizen in need. That's the truth.

– Kevin Avera, Monticello, Fla.

How outrageously offensive to compare the social safety nets to butter, as though people on Social Security and Medicare are living some kind of luxurious lifestyle. I agree that we need to maintain a strong military and that sequestration is the wrong thing to do. I also believe that Ike was wrong; we can have both social safety nets and guns. The question is how and who is going to pay for it. If we want both, we all have to pay our fair share of the taxes needed. especially the rich. Stop cheating, finding loopholes or moving company headquarters

to foreign countries. What has happened to our compassion for others not as fortunate as us?

– Lee A. Stream, Stacy, Minn.

'Prostate Panic'

Judith S. Hurley's article (Living Well, March) overlooked the aggressiveness of some prostate cancers associated with exposure to Agent Orange in Vietnam. If it had not been for the warning from my semiannual PSA test, my aggressive, eventually terminal stage 4 metastatic prostate cancer would have spread even further through my 73-year old body before being detected. Even after the diagnosis, I did not have any other symptoms that would have alerted my urologist to the possibility that I had prostate cancer.

Vietnam veterans, tell your doctor that you served in Vietnam and were possibly exposed to Agent Orange. If your PSA level starts going up, insist that he or she not wait six months before administering another blood test. And if you hear the words "watchful waiting," find another doctor.

– Jim Small, New Castle, Ind.

'Wave of Popularity'

I am a Vietnam War-era veteran, and the article by Don Keith about ham radio operators (March) brought back memories. I was stationed at Kadena Air Base on Okinawa, and a staff sergeant had a ham operation set up. He would call up other hams and let us talk to family members on the West Coast. To an 18-year-old airman in 1958,

this was a big deal, being so far from home but able to talk to family members.

- Carmen J. Christiana, Clifton Heights, Pa.

I have been an amateur radio operator since 1962, when I received my license while stationed at Galena Air Force Station in Alaska. Although I was a radar technician, it was my job when the bands were open to run phone patches back to the lower 48 for all 100 men on site, from the commander down to airmen third class. We would make contact with hams who would connect their radios to telephones dialed to our loved ones. I would stay at my station for as long as the bands were open, night and day; I was encouraged to do this by being showered with food and drink by everyone who wanted to talk.

- Robin Claude Henderson, Madison, Ind.

The American Legion and law enforcement

As an Army veteran and a recently retired municipal police officer with over 30 years of service, I want to personally thank National Commander Michael D. Helm and The American Legion for its support of all law enforcement officers in this great nation. I hope this support will inspire the silent majority to stand up for their law enforcement officers, who stand on guard 24 hours a day, seven days a week throughout the year to protect the communities they are sworn to serve in the most difficult of times.

Leonard F. Baillargeon,
 New Bedford, Mass.

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'Veterans cannot suspend death'

As Memorial Day approaches, I take great pride in one of The American Legion's more recent victories, which restored the burial of veterans in one of our nation's overseas cemeteries.

This particular cemetery is located on what used to be Clark Air Base in the Philippines. It is the final resting place for more than 8,600 U.S. veterans and dependents, including Philippine Scouts, who fought for the U.S. Army when the country was still an American territory.

Shortly after receiving \$5 million from the U.S. government to maintain Clark Veterans Cemetery (CVC), a Philippine government official halted burials there because "guidelines on the maintenance and use of CVC have to first be made."

Naturally, this did not sit well with veterans, their families or The American Legion.

"Veterans, like other members of any society, cannot suspend death while politicians prepare a restoration plan," Legionnaire Edward J. Craft wrote to me. "This is not the way to treat a veteran who has given so much for his country."

Shortly after I received Craft's letter, our legislative staff contacted Sen. Kelly Ayotte, R-N.H., a key supporter of CVC. She communicated with the Philippine ambassador, and within two weeks the cemetery had resumed burials. Prior to our involvement, the burials were stopped for about four months. Veterans and their families had been given excuses and promises, but little action.

During my visit to the Philippines, Department Commander Gordon G. Grubb told me of a late Vietnam War veteran named John Fortune, whose son, Army Sgt. Maurice Fortune, died in Iraq in 2004. "He is the only Iraq war veteran buried at the cemetery," Grubb said. "Now his father, a Vietnam veteran, cannot join him. His ashes remain on hold until they settle this thing."

Righting this wrong was not an option but a directive by the Legion's founders, who wrote in the preamble to our constitution that we are to "sanctify our comradeship by our devotion to mutual helpfulness."

Grateful that the cemetery resumed burials, Grubb says the Legion made the difference. And we continue to make a difference as we advocate for the respectful remembrance of more than 218,000 veterans buried in U.S. military cemeteries in 16 foreign countries.

In contrast to the Philippine cemetery's bureaucratic limbo is the devotion demonstrated on the other side of the world by Madame Simone Renaud, whose work to maintain the gravesites of 15,000 fallen liberators was told in the documentary film and book "Mother of Normandy," proceeds from which benefit the Legion's Overseas Graves Decoration Trust Fund.

"In the early morning darkness of June 6, 1944, the wife of Ste. Mère-Église Mayor Alexandre Renaud bore witness to freedom's salvation," the book says. "In the days and weeks that followed, as the U.S wounded and dead passed before her eyes, she made a simple vow that would last the rest of her life, and beyond. 'Never forget.'"

Michael D Helm

Neither should we.



National Commander Michael D. Helm

MEMORANDA

SPRING MEETINGS

The National Executive Committee will meet in Indianapolis May 6-7. Keep up to date with news from the Spring Meetings on the Legion's national website and social media.

www.legion.org

www.legion.org/media

ARMED FORCES DAY

Since 1950, the United States has observed Armed Forces Day on the third Saturday in May – this year, May 16. Share how your post is recognizing the U.S. military branches and those serving in them, on the Legiontown blog.

www.legion.org/legiontown

POPPY PROGRAM

May 25 is National Auxiliary Poppy Day. Resolution No. 3, passed by the NEC in 2014, encourages Legion posts and Sons squadrons to get involved with their Auxiliary units in promoting and distributing poppies for the Poppy Program. Auxiliary poppies are an important fundraiser toward the shared mission of helping veterans and their families.

Posts without an Auxiliary unit should consider starting a Poppy Program of their own. Contact your department for more information.

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If Betty Gonzales worked as passionately at her job as she does for The American Legion, she'd be the best employee, her bank supervisor quips.

All kidding aside, Gonzales is well known for her volunteer work and enthusiastic support of local veterans. She is active in the Department of Missouri's Operation Comfort Warriors program and works with post-9/11 veterans who suffer from the most severe cases of PTSD and TBI.

"I'm not the kind of person who sits around and doesn't do anything," she says. "I need to be out and about and doing some good."

Gonzales has braved all kinds of weather - blizzards to brutal summer heat – while serving as a rifleman with the St. Louis Service Women's Post 404 honor guard. Members perform the entire ceremony, from firing rifle volleys to folding the flag and handing empty shell casings to the veteran's family. A member of the Auxiliary plays Taps.

"We see it as an honor to be there, and we let the family know that what she did is so respected by us, especially if she was a World War II veteran," says Gonzales, who often takes vacation days from work to participate in the ceremonies. "We want that family to know that we honor and treasure that person they lost."

Just as Gonzales honors fellow veterans today, she knows one day her comrades will do the same for her.

"The military funeral means a lot to me," she explains. "Hopefully, by the time my time comes, there is going to be some OEF/OIF person there to do mine."

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The "A Mother Holds Her Child's Heart" Birthstone Pendant is exquisitely handcrafted and plated in shimmering sterling silver. The pendant's exclusive design features a round disk sparkling with a pavé of clear crystals that has a unique, heart-shaped "window" in the center. Floating inside the glass inlay that forms the heart are free-moving heart-shaped birthstones—one for each precious child—and the engraved sentiment, "A Mother Holds Her Child's Heart Forever". The back of the pendant is engraved with the names of the children represented by the birthstones. The pendant is suspended from an 18" chain. It's a beautiful way for Mom to display her treasured family!

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YES. Please reserve my pendant with the names and birthstones indicated at left. Limit of 6 total names (max. 10

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Signature		
Mrs. Mr. Ms.		
	Name (Please Print Clea	arly)
Address		
City	State	Zip
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E-Mail (Optional)		
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BY BETH W. ORENSTEIN

Veterans are at higher risk for the hepatitis C virus than most Americans and have long been encouraged to be screened by a simple blood test. Hepatitis C – also called "hep C" – affects the liver, a vital organ.

"Hep C is the leading indication for liver transplant and the leading reason for liver cancer in the United States and in veterans," says Robert Gish of San Diego, a medical consultant who specializes in hepatitis.

People with blood exposure to hep C and patients with elevated liver tests have commonly been tested as well. Two years ago, the Centers for Disease Control and Prevention (CDC) expanded its recommendation for screening for hep C to include all baby boomers (those Americans born between 1945 and 1965).

LIMITED TREATMENT Not only has testing changed, but so has the treatment. Hep C can lead to cirrhosis (scarring of the liver) and liver cancer in 40 percent of people with the disease. Yet in the past, doctors may not have recommended treatment before advanced cirrhosis developed, or unless there was some other obvious need for treatment, because it often had wretched side effects, took six months to a year to work and had only a 50/50 chance of success, Gish says.

In recent years, innovative new drugs have dramatically changed treatment for hep C. In 2011, the Food and Drug Administration approved for the first time direct-acting antivirals (DAAs) for the treatment of hep C. DAAs block enzymes the virus uses to multiply.

NEW OPTIONS The new drugs, which are all-oral medications for most patients, have few side effects and are generally well tolerated. Treatment may be for eight, 12 or 24 weeks depending on how advanced the virus is. The majority of patients can be treated for 12 weeks, Gish says.

Other hep C drugs are in the late stages of development and could be introduced sometime this year or next.

See **NEW DRUGS** on page **15**

Know the risk for hep C

Hep C is a virus. But unlike a cold or flu, it isn't easy to catch. The only way the virus is transmitted is by coming in direct contact with the blood of someone who has it. The infection is most prevalent among those who were born between 1945 and 1965 and were most likely infected in the 1970s and 1980s.

Ways you can come in contact with contaminated blood include:

- Receiving treatment for hemophilia and other bloodclotting diseases prior to 1987, when more advanced manufacturing methods were developed.
- Receiving a blood transfusion or organ transplant before screening for the virus began in 1992.
- Undergoing surgery or other invasive medical procedures in countries that don't screen for it.
- Mishandling or getting injured with a contaminated needle when working in health-care settings.
- Sharing needles, which is common with illegal drugs. Small amounts of contaminated blood can remain on the needle, syringe or other materials. You could be at risk even if you only injected once many years ago.
- Piercing and tattooing can be risk factors if poor infection-control practices are used. Hep C has not been shown to spread through licensed, commercial tattooing facilities, according to the CDC.
- Sharing personal care items, such as razors or toothbrushes, that have come in contact with the blood of someone who has it. This is less common.
- Having sexual contact with someone infected. This, too, is less common. No vaccine for hepatitis C is available.



BREO ELLIPTA can help improve your breathing.

- Once-daily BREO helps increase airflow from the lungs for a full 24 hours. Your results may vary.
 - In patients with a history of COPD flare-ups, BREO helps reduce the risk of future flare-ups. This is when symptoms are worse for several days and require steroids (oral or injectable), antibiotics, and/or a hospital stay. BREO is not for use to treat sudden symptoms of COPD and won't replace a rescue inhaler.

BREO

30

Talk to your doctor about BREO, and visit myBREO.com to get your first full prescription free.*

(COPD is Chronic Obstructive Pulmonary Disease) APPROVED USES

BREO ELLIPTA is approved for adults with chronic obstructive pulmonary disease (COPD), including chronic bronchitis, emphysema, or both.

BREO ELLIPTA is a prescription medicine that is used long term as 1 inhalation 1 time each day to improve symptoms of COPD for better breathing and to reduce the number of flare-ups (the worsening of your COPD symptoms for several days). BREO is not for use to treat sudden symptoms of COPD and won't replace a rescue inhaler. BREO is not for the treatment of asthma.

IMPORTANT SAFETY INFORMATION

- BREO ELLIPTA is only approved for use in COPD. BREO is NOT approved for use in asthma.
- People with asthma who take long-acting beta₂-adrenergic agonist (LABA) medicines, such as vilanterol (one of the medicines in BREO), have an increased risk of death from asthma problems. It is not known if LABA medicines increase the risk of death in people with COPD.
- Call your healthcare provider if breathing problems worsen over time while using BREO.
- Get emergency medical care if your breathing problems worsen quickly, or if you use your rescue inhaler but it does not relieve your breathing problems.
- Do not use BREO to treat sudden symptoms of COPD. Always have a rescue inhaler with you to treat sudden symptoms.
- BREO is not for the treatment of asthma. It is not known if BREO is safe and effective in people with asthma.
- Do not use BREO if you have severe allergy to milk proteins or any of the ingredients in BREO. Ask your healthcare provider if you are not sure.
- Do not use BREO more often than prescribed.
- Do not take BREO with other medicines that contain a LABA for any reason. Tell your healthcare provider about all the medicines you take and about all of your health conditions.
- BREO can cause serious side effects, including:
 - pneumonia. People with COPD have a higher chance of getting pneumonia. BREO may increase the chance of getting pneumonia. Call your healthcare provider if you notice any of the following symptoms: increase in mucus (sputum) production; change in mucus color; fever; chills; increased cough; increased breathing problems
 - thrush (fungal infection) in mouth and/or throat. You may develop
 a yeast infection (Candida albicans) in your mouth or throat. Rinse
 your mouth with water without swallowing after use to help prevent
 thrush in your mouth and throat.
 - serious allergic reactions. Call your healthcare provider or get emergency medical care if you get any of the following symptoms of a serious allergic reaction: rash; hives; swelling of the face, mouth, and tongue; breathing problems



(serious side effects, cont'd)

- sudden breathing problems immediately after inhaling your medicine
- effects on heart: increased blood pressure; a fast and/or irregular heartbeat; chest pain
- effects on nervous system: tremor; nervousness
- reduced adrenal function. This can happen when you stop taking an oral
 corticosteroid (such as prednisone) and start taking a medicine containing
 an inhaled corticosteroid (such as BREO). Symptoms include: feeling tired;
 lack of energy; weakness; nausea and vomiting; low blood pressure.
- changes in laboratory blood values (sugar, potassium)
- weakened immune system and increased chance of getting infections (immunosuppression). You should avoid exposure to chickenpox and measles, and, if exposed, consult your healthcare provider without delay. Worsening of existing tuberculosis, fungal, bacterial, viral, or parasitic infections, or herpes infection of the eye (ocular herpes simplex) may occur.
- bone thinning or weakness (osteoporosis)
- eye problems including glaucoma and cataracts. You should have regular eye exams while using BREO.
- Common side effects of BREO include:
- runny nose and sore throat
- upper respiratory tract infection
- headache
- thrush in mouth and/or throat. Rinse your mouth without swallowing after use to help prevent this

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

*Restrictions apply. See myBREO.com for eligibility rules.

Please see Brief Summary of Prescribing Information for BREO ELLIPTA on adjacent pages.

**

BREO ELLIPTA was developed in collaboration with **Theravance**





BREO® ELLIPTA® (fluticasone furoate 100 mcg and

vilanterol 25 mcg inhalation powder) BRIEF SUMMARY

Read the Medication Guide that comes with BREO ELLIPTA (*BREE-oh-ee-LIP-ta*) before you start using it and each time you get a refill. There may be new information. This summary does not take the place of talking to your healthcare provider about your medical condition or treatment.

What is the most important information I should know about BREO ELLIPTA?

BREO ELLIPTA is only approved for use in chronic obstructive pulmonary disease (COPD). BREO ELLIPTA is NOT approved for use in asthma.

BREO ELLIPTA can cause serious side effects, including:

- People with asthma who take long-acting beta₂-adrenergic agonist (LABA) medicines, such as vilanterol (one of the medicines in BREO ELLIPTA), have an increased risk of death from asthma problems. It is not known whether fluticasone furoate, the other medicine in BREO ELLIPTA, reduces the risk of death from asthma problems seen with LABA medicines.
- It is not known if LABA medicines, such as vilanterol (one of the medicines in BREO ELLIPTA), increase the risk of death in people with COPD.
- Call your healthcare provider if breathing problems worsen over time while using BREO ELLIPTA. You may need different treatment.
- · Get emergency medical care if:
- your breathing problems worsen quickly
- you use your rescue inhaler, but it does not relieve your breathing problems.

What is BREO ELLIPTA?

BREO ELLIPTA combines an inhaled corticosteroid (ICS) medicine, fluticasone furoate, and a LABA medicine, vilanterol.

- ICS medicines, such as fluticasone furoate (one of the medicines in BREO ELLIPTA), help to decrease inflammation in the lungs. Inflammation in the lungs can lead to breathing problems.
- LABA medicines, such as vilanterol (one of the medicines in BREO ELLIPTA), help the muscles around the airways in your lungs stay relaxed to prevent symptoms such as wheezing, cough, chest tightness, and shortness of breath. These symptoms can happen when the muscles around the airways tighten. This makes it hard to breathe.

BREO ELLIPTA is used for COPD. COPD is a chronic lung disease that includes chronic bronchitis, emphysema, or both. BREO ELLIPTA is a prescription medicine that is used long term as 1 inhalation 1 time each day to improve symptoms of COPD for better breathing and to reduce the number of flareups (the worsening of your COPD symptoms for several days).

- BREO ELLIPTA is not for use to treat sudden symptoms of COPD. Always have a rescue inhaler (an inhaled, short-acting bronchodilator) with you to treat sudden symptoms. If you do not have a rescue inhaler, contact your healthcare provider to have one prescribed for you.
- BREO ELLIPTA is not for the treatment of asthma. It is not known if BREO ELLIPTA is safe and effective in people with asthma.
- BREO ELLIPTA should not be used in children.
 It is not known if BREO ELLIPTA is safe and effective in children.

Who should not use BREO ELLIPTA?

Do not use BREO ELLIPTA if you:

- have a severe allergy to milk proteins. Ask your healthcare provider if you are not sure.
- are allergic to fluticasone furoate, vilanterol, or any of the ingredients in BREO ELLIPTA.
 See "What are the ingredients in BREO ELLIPTA?" below for a complete list of ingredients.

What should I tell my healthcare provider before using BREO ELLIPTA?

Tell your healthcare provider about all of your health conditions, including if you:

- have heart problems
- have high blood pressure
- have seizures
- have thyroid problems
- have diabetes
- have liver problems
- have weak bones (osteoporosis)
- have an immune system problem
- have eye problems such as glaucoma or cataracts
- are allergic to any of the ingredients in BREO ELLIPTA, any other medicines, or food products. See "What are the ingredients in BREO ELLIPTA?" below for a complete list of ingredients.
- have any type of viral, bacterial, or fungal infection
- are exposed to chickenpox or measles or have been around anyone who has chickenpox or measles
- have any other medical conditions
- are pregnant or planning to become pregnant. It is not known if BREO ELLIPTA may harm your unborn baby.
- are breastfeeding. It is not known if the medicines in BREO ELLIPTA pass into your milk and if they can harm your baby.

Tell your healthcare provider about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements. BREO ELLIPTA and certain other medicines may interact with each other. This may cause serious side effects. Especially, tell your healthcare provider if you take antifungal or anti-HIV medicines.

Know the medicines you take. Keep a list of them to show your healthcare provider and pharmacist when you get a new medicine.

How should I use BREO ELLIPTA?

Read the step-by-step instructions for using BREO ELLIPTA in the Medication Guide.

- Do not use BREO ELLIPTA unless your healthcare provider has taught you how to use the inhaler and you understand how to use it correctly.
- Use BREO ELLIPTA exactly as prescribed.
 Do not use BREO ELLIPTA more often than prescribed.
- Use 1 inhalation of BREO ELLIPTA 1 time each day. Use BREO ELLIPTA at the same time each day.
- If you miss a dose of BREO ELLIPTA, take it as soon as you remember. Do not take more than 1 inhalation per day. Take your next dose at your usual time. Do not take 2 doses at one time.
- If you take too much BREO ELLIPTA, call your healthcare provider and get medical help right away if you have any unusual symptoms, such as worsening shortness of breath, chest pain, increased heart rate, or shakiness.
- Do not use other medicines that contain a LABA for any reason. Ask your healthcare provider or pharmacist if any of your other medicines are LABA medicines.
- Do not stop using BREO ELLIPTA unless told to do so by your healthcare provider because your symptoms might get worse. Your healthcare provider will change your medicines as needed.
- BREO ELLIPTA does not relieve sudden symptoms. Always have a rescue inhaler with you to treat sudden symptoms. If you do not have a rescue inhaler, call your healthcare provider to have one prescribed for you.
- Call your healthcare provider or get medical care right away if:
 - your breathing problems get worse
 - you need to use your rescue inhaler more often than usual
 - your rescue inhaler does not work as well to relieve your symptoms
 - you need to use 4 or more inhalations of your rescue inhaler in 24 hours for 2 or more days in a row
 - you use 1 whole canister of your rescue inhaler in 8 weeks

What are the possible side effects with BREO ELLIPTA?

BREO ELLIPTA can cause serious side effects, including:

- See "What is the most important information I should know about BREO ELLIPTA?"
- pneumonia. People with COPD have a higher chance of getting pneumonia. BREO ELLIPTA may increase the chance of getting pneumonia. Call your healthcare provider if you notice any of the following symptoms:
 - increase in mucus (sputum) production
- change in mucus color
- fever
- chills
- increased cough
- increased breathing problems

(Continued on the next page)

BREO® ELLIPTA® (fluticasone furoate 100 mcg and vilanterol 25 mcg inhalation powder)

BRIEF SUMMARY (cont'd)

(serious side effects, cont'd)

- thrush (fungal infection) in mouth and throat. You may develop a yeast infection (Candida albicans) in your mouth or throat. Rinse your mouth with water without swallowing after using BREO ÉLLIPTA to help prevent thrush in your mouth and throat.
- serious allergic reactions. Call your healthcare provider or get emergency medical care if you get any of the following symptoms of a serious allergic reaction:
 - rash
- swelling of the face, mouth, and tongue
- hives
- breathing problems
- sudden breathing problems immediately after inhaling your medicine
- effects on heart
 - increased blood pressure
 - a fast and/or irregular heartbeat
 - chest pain
- · effects on nervous system
 - tremor
- nervousness
- reduced adrenal function (adrenal insufficiency). Adrenal insufficiency is a condition in which the adrenal glands do not make enough steroid hormones. This can happen when you stop taking oral corticosteroid medicines (such as prednisone) and start taking a medicine containing an inhaled corticosteroid (such as BREO ELLIPTA). When your body is under stress from fever, trauma (such as a car accident), infection, surgery, or worse COPD symptoms, adrenal insufficiency can get worse and may cause death. Symptoms of adrenal insufficiency include:
 - feeling tired (fatigue)nausea and vomiting
- - lack of energy
- low blood pressure
- weakness
- changes in laboratory blood values (sugar, potassium)
- weakened immune system and increased chance of getting infections (immunosuppression)
- bone thinning or weakness (osteoporosis)
- eye problems including glaucoma and cataracts. You should have regular eye exams while using BREO ELLIPTA.

Common side effects of BREO ELLIPTA include:

- runny nose and sore throat
- upper respiratory tract infection
- headache
- thrush in the mouth and/or throat. Rinse your mouth without swallowing after use to help prevent this.

Tell your healthcare provider about any side effect that bothers you or that does not go away.

These are not all the side effects with BREO ELLIPTA. Ask your healthcare provider or pharmacist for more information.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

What are the ingredients in BREO ELLIPTA?

Active ingredients: fluticasone furoate, vilanterol

Inactive ingredients: lactose monohydrate (contains milk proteins), magnesium stearate

Ask your healthcare provider or pharmacist for additional information about BREO ELLIPTA. You can also contact the company that makes BREO ELLIPTA (toll free) at 1-888-825-5249 or at www.myBREO.com.

BREO and ELLIPTA are registered trademarks of the GSK group of companies.

BREO ELLIPTA was developed in collaboration with Theravance



GlaxoSmithKline Research Triangle Park, NC 27709

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NEW DRUGS

continued from page 12

"This is an exciting time for people with hep C, as treatment is rapidly changing for the better," Gish says.

He adds that the new drugs have virtually no side effects and can cure hep C in patients who have failed other treatments.

TREATMENT OPTIONS At

VA, a team of specialists will determine whether treatment now is the right option for you. The team will also determine the type of medication and length of treatment best for your genotype and condition.

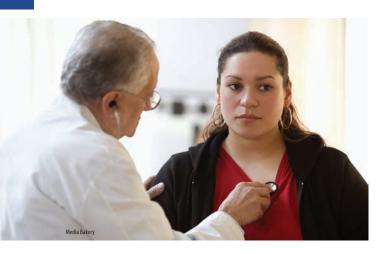
If you are treated for hep C, vou'll be tested three months after you complete treatment to determine if you are clear of the virus, which indicates vou've truly been cured of the disease.

LIFESTYLE MATTERS

While new drugs do get a lot of attention, lifestyle including maintaining a healthy weight – remains an important part of hep C treatment, Gish says.

Beth W. Orenstein of Northampton, Pa., is a freelance medical writer and a regular contributor to Living Well.

Living Well is designed to provide general information. It is not intended to be, nor is it, medical advice. Readers should consult their physicians when they have health problems.



DEFENSE against a-fib

Ever felt like your heart was a about to beat out of your chest? If so, the Cleveland Clinic warns that you may have atrial fibrillation, or "a-fib." Symptoms include rapid heartbeat, tiredness and chest pains.

If you suspect you have a-fib, see a cardiologist to get an easy, noninvasive test, the center advises. Because a-fib is a major risk factor for stroke and heart failure, "it needs a doctor's attention."

Among the treatment options:

- Lifestyle changes
- Noninvasive treatments like electrical cardioversion
- Invasive procedures such as catheter ablation/pacemaker implantation or pulmonary vein isolation
- Noninvasive options like radiofrequency, microwave or cold-temperature procedures
- Specialized heart surgery, which uses a series of incisions in the right and left atria to confine the heart's impulses to defined pathways

Request an a-fib treatment guide online to learn more:

🦚 clevelandclinic.org/lp/heart/arrhythmia/quideform.asp

Google, Mayo Clinic team on search results

Wired magazine reports that Google is pursuing more clarity in health-related Web searches with a new database of 400 commonly searched medical conditions, each pre-vetted and researched by an average of 11 doctors at the Mayo Clinic. Google users typing in search terms will have at the top of their results this more authoritative information, which will include symptoms, frequency, treatments and more.

Google estimates that one in every 20 searches on its engine is health-related.

LISTEN UP! How to watch your hearing

You'd notice if your vision became blurry; you'd start getting headaches and becoming nauseated. But hearing loss generally comes on so gradually that most people don't even notice. You'd schedule an appointment for your vision, so why not for your hearing?

May is Better Hearing & Speech Month, so consider these numbers:

- About 36 million Americans have some degree of hearing loss.
- More than half of the hearing-impaired population is younger than 65.

Exposure to excessive noise is one of the leading risk factors for hearing loss – and one that's largely preventable. Here are some steps you can take to reduce your risks:

- If you work in a noisy environment, check with your employer to make sure your hearing is adequately protected in compliance with Occupational Safety and Health Administration (OSHA) regulations.
- Limit the time you're exposed to noise.
- Wear hearing protection, such as earplugs or muffs, when participating in high-noise activities.
- Turn down the volume on the TV, radio and stereo. Be extra cautious when listening to music on an iPod or other personal audio device, especially if you're using earbuds.





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Recognize communist Cuba



SUPPORT

Rep. Charles B. Rangel,

■ Rangel is a senior member of the House Committee on Ways



THE HEART OF THE ISSUE

President Obama says the normalization

of relations with Cuba will help the U.S.

economy and promote peace in the region.

Critics say Cuba is a dictatorship that fails

to respect human rights and remains

a threat to national security.

OPPOSE

Rep. Ileana Ros-Lehtinen,

■ Ros-Lehtinen is a member of the House Permanent Select Committee on Intelligence.

President Obama's historic announcement on renewing relations with Cuba provides an exciting opportunity to grow our economy, share our democratic values and form new partnerships in fighting various global threats. For more than 20

years, I have been fighting to end the U.S. embargo and normalize relations with Cuba. I am now optimistic about the prospects of promoting peace and prosperity between our two nations and in the region.

For so long, our government has tried to diminish and

weaken Cuba economically to destabilize the Castro regime. However, sanctions simply have not worked. While some argue that ending the embargo will be a victory for the Castro family, I maintain that commercial and economic engagement is key to promoting peace within the global community in the 21st century.

I am pleased that 25 of my colleagues in the House of Representatives joined me in introducing the Free Trade with Cuba Act (H.R. 403), legislation I first proposed in 1993 and have reintroduced in every subsequent Congress. This bill would lift the embargo, thereby creating an estimated 6,000 U.S. jobs and generating billions of dollars in lost revenue. I have also reintroduced two smaller measures that would increase travel, medical and agricultural exports to Cuba.

As a Korean War veteran and top Democrat on the House Ways and Means Subcommittee on Trade, I advocate for good foreign policy and diplomacy that can make our country safer and stronger. By removing this trade embargo, we encourage the exchange of not only goods and culture but democratic ideals. We can bring freedom to Cuba by showing them what America is all about.

President Obama's recent changes to U.S.-Cuban policy have been the subject of controversy due to the fact that the administration gave the Castro regime many concessions without receiving anything in return. Whether it's Vladimir Putin

in Russia, the ayatollahs in Iran or Kim Jong-un in North Korea, this bad approach toward a communist dictatorship continues to reward our adversaries while jeopardizing our national security.

If you want to know why the president's unilateral concessions to the Castros are a mistake, all you need to do is look at the regime's record of threatening U.S. national security through its extensive spy network and support for other rogue regimes. On Nov. 4, 1999, the House Committee on International Relations convened a congressional hearing titled "The Cuban Program: Torture of American Prisoners By Cuban Agents." At this hearing, we heard testimony from American prisoners of war who were tortured at a prison camp in North Vietnam known as "the Zoo" between August 1967 and August 1968. According to reports, 19 of our courageous servicemen, including Navy Lt. Cmdr. John McCain, were psychologically tortured and beaten by Cuban agents working under orders from Hanoi.

Cuba, an unabashed bête noire of the United States, is unflinching in celebrating the return of convicted spies, one of whom was responsible for the murder of U.S. citizens. Its spy network is brazen and at one point penetrated the highest levels of the Defense Intelligence Agency. To believe that the Cuban regime will change based on concessions from the United States is naïve and threatens our national security.

The Honorable (name), U.S. Senate, Washington, DC 20510 • Phone: (202) 224-3121 The Honorable (name), U.S. House of Representatives, Washington, DC 20515 • Phone: (202) 225-3121

Introducing The new and revolutionary Jacuzzi[®] Hydrotherapy Shower.



The Jacuzzi[®] Hydrotherapy Shower provides a lifetime of comfort and relief... safely and affordably.

As we age, the occasional aches and pains of everyday life become less and less occasional. Most of us are bothered by sore muscles, creaky joints and general fatigue as we go through the day- and it's made worse by everything from exertion and stress to arthritis and a number of other ailments. Sure, there are pills and creams that claim to provide comfort, but there is only one 100% natural way to feel better... hydrotherapy. Now, the world leader in hydrotherapy has invented the only shower that features Jacuzzi® Jets. It's called the Jacuzzi® Hydrotherapy Shower, and it can truly change your life.

For over 50 years, the Jacuzzi® Design Engineers have worked to bring the powerful benefits of soothing hydrotherapy into millions of homes. Now, they've created a system that can fit in the space of your existing bathtub or shower and give you a lifetime of enjoyment, comfort and pain-relief. They've thought of everything. From the high-gloss acrylic surface, slipresistant flooring, a hand-held shower wand to a comfortable and adjustable seat, to strategically-placed grab bars and lots of storage, this shower has it all.

Why wait to experience the Jacuzzi® Hydrotherapy Shower? Call now... it's the first step in getting relief from those aches and pains.

AGING = PAIN

For many, arthritis and spinal disc degeneration are the most common source of pain, along with hips, knees, shoulders and the neck. In designing the Jacuzzi Hydrotherapy Shower, we worked with expert physicians to maximize its pain relieving therapy by utilizing the correct level of water pressure to provide gentle yet effective hydrotherapy.

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First step taken to relax 40-mile rule

BY TOM PHILPOTT

Three months after VA issued Choice Cards to unlock private-sector health care for more veterans – those who face waits longer than 30 days for VA care or who reside more than 40 miles from VA medical facilities – the number of veterans using the program was "almost microscopically low," American Legion

Legislative Division Director Ian de Planque told a joint hearing of the Senate and House Veterans' Affairs committees in late February.

His complaint was echoed by other VSOs whose members are frustrated that the cards don't work as they envisioned. Cardholders have been particularly irked by how the 40-mile rule was defined in ways that restricted access and clearly held down VA costs.

Lawmakers are fielding complaints, too, which is why Sen. Johnny Isakson, R-Ga., new chairman of the Senate Veterans' Affairs Committee, along with his House counterpart, Rep. Jeff Miller, R-Fla., promised changes. By late March, VA had taken its first step to modify the 40-mile rule and promised to work with Congress to relax it even more.

To qualify for private-sector care using a Choice Card, a veteran can't reside within 40 miles of a VA medical facility. Guidance in a House-Senate conference report on the law, however, advised VA to use "geodesic" or as-the-crow-flies distance. So veterans who faced drives longer than 40 miles using roads to reach VA care were still to be denied access to nearer private-sector doctors and hospitals.

With VA and Congress under pressure from irate veterans to apply more common sense to Choice Card rules, VA announced March 24 that eligibility would be defined by driving mileage rather than "straight line" distance. VA Deputy Secretary Sloan Gibson told a Senate committee that day that, in implementing the law, VA should have ignored conference report language and the obvious "intent of Congress" and "done what we thought was the right thing for veterans" from the start: "I guarantee you we would have been criticized for doing it, but at least I could have looked myself in the mirror and said, 'Well, we did the right thing for vets in the process."

Removing a second quirky aspect of the rule will

require legislation, Gibson said. That part leaves veterans ineligible for the card if they live within 40 miles of any nearby VA health-care facility, regardless of whether it offers the type of care they need. So a heart patient is still denied access to outside care if there's a VA clinic nearby, even if the nearest VA

cardiologist is 100 miles away.

Miller acknowledged that during last summer's negotiations he had accepted the rigid language on the 40-mile rule to keep the cost of the program "manageable" during its three-year run. Otherwise, the Congressional Budget Office (CBO) estimated the cost could be \$50 billion over three years, he said.

In releasing the VA budget request for fiscal 2016, however, VA Secretary Robert McDonald asked for authority to reprogram some of the \$10 billion fenced for Choice Card to other VA needs. Rather than allow that, Miller and Isakson have told McDonald they intend to further soften restrictions on the 40-mile rule.

Congress "should have no problem expanding that program to take advantage of those excess funds," said Louis Celli, the Legion's Veterans Affairs & Rehabilitation director.

That \$10 billion should be spent to ensure that veterans receive more timely and convenient access to health care, whether they use the Choice Card or some other VA program that delivers private-sector care, Celli added, and Congress shouldn't need to find more money to accommodate changes.

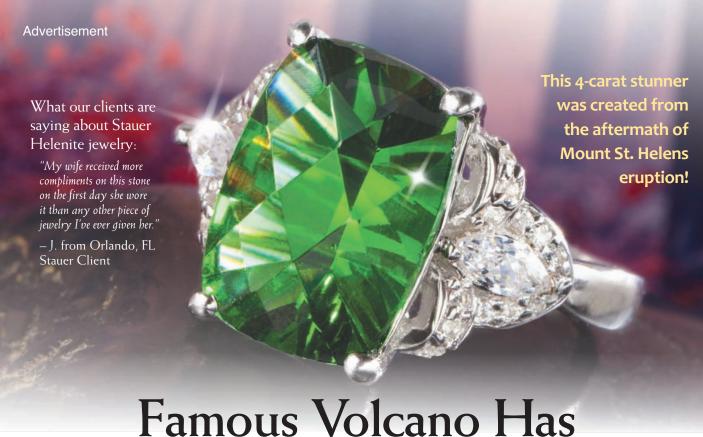
"They could go back to CBO and ask them to reconsider" its budget projections "now that we've had six months of existing authority under the Choice program," Celli said. "It seems the VA medical system has been able to take care of a lot of more veterans with existing resources than CBO predicted. It might have been we overpaid for this program, and we can use those already-committed funds" to further relax the 40-mile rule, he added.

If that happens, thousands more veterans would secure routine access to government-paid health care in the private sector.

Tom Philpott has been covering military personnel and veterans issues for more than 30 years.



VA's narrow interpretation of the Choice Card's 40-mile rule was said to exclude too many veterans, including those needing specialty care.



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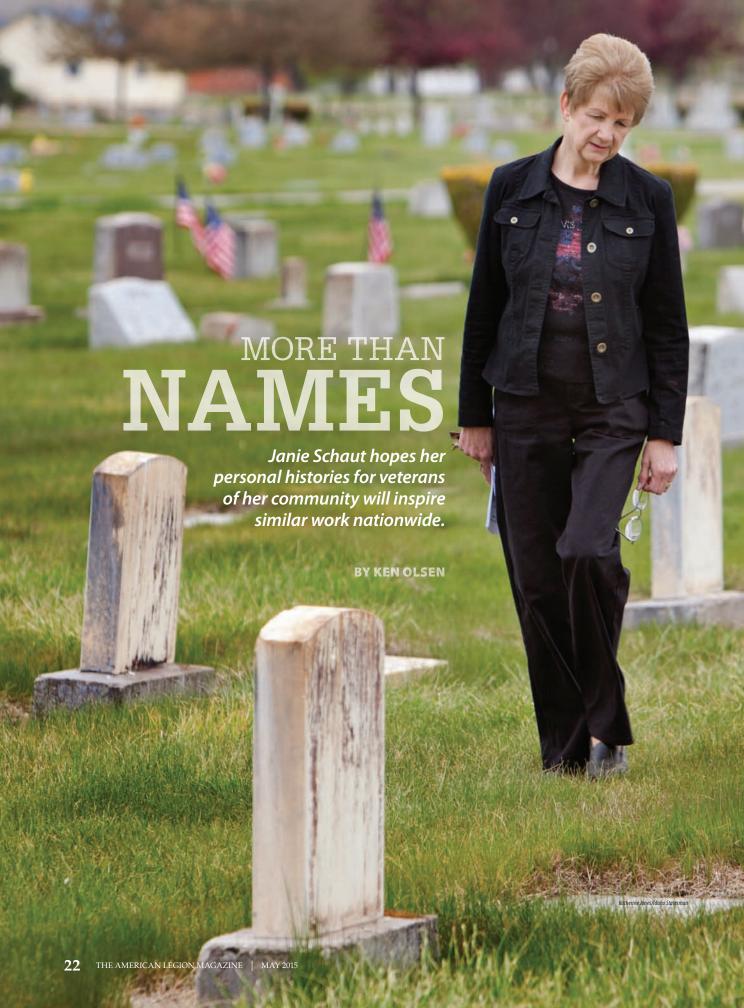
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he is known for walking the county cemeteries – Emmett, Ola, Sweet-Montour and Bramwell – on even the coldest days, kneeling at headstones, taking careful notes and sometimes talking to the departed.

She retrieves lost stories of veterans, giving families a part of a loved one they never knew.

She is Janie Dresser Schaut, a Vietnam War Army nurse who has persuaded 500 veterans to tell their stories, and the families and friends of another 1,500 deceased servicemembers to turn

over letters, photos and diaries that detail what it was like to kill a first enemy soldier, miss home and worry about a brother missing in action. At more than 2,000 biographies and counting, she no longer has time for the piano and hopes to get back to the harp, but she knows there are hundreds of other Gem County, Idaho, veterans' stories waiting.

"This is like a calling to her," says Cindy Gorino, who came to know her father through Schaut's work. "Everybody has come alive because of what she's doing."

curiosity about veterans was sparked by childhood visits to the grave of her second cousin,

BORN HISTORIAN Schaut's

Lawrence Dresser, the first man from Emmett, Idaho, to die in World War I and the namesake of

American Legion Post 49. "It first kind of struck me when I was 6," Schaut says. "I wondered where France was. I wondered how many other veterans were buried out there."

She gave up playing cowboys and Indians, dug foxholes in the field behind her house and recruited neighborhood friends for summer war games. "We packed our lunches and went to the trenches," Schaut says. "Mostly we threw mud and rocks at each other." Much to the children's disappointment, her father filled the holes after school resumed one fall because he worried a neighbor's cow or horse would get injured.

But her father – a game warden, farmer and mill worker – gave her an appreciation for the musical side of war. "My dad would sing when I went out in his truck with him," Schaut says. "I learned all the old World War I and World War II songs."

Her father, known as "Babe" Dresser, also taught

young Janie to use firearms. By the time she was in high school she was proficient with everything from a .45-caliber revolver to a .30-06 rifle. "I was ready to go into the Army," she says. "After I got home from Vietnam, I never touched a gun again."

At 16, Schaut was immersed in military history and asking for Samuel Morison's account of the Battle of Guadalcanal for Christmas. Once she discovered the story of U.S. nurses captured when Japanese troops invaded the Philippines, she knew she'd found her calling. Understanding what they

endured kept her going through the Saint Alphonsus Hospital School of Nursing in Boise, where all but 14 of 43 students washed out.

"Every time I thought about quitting, I thought of those nurses on Bataan," she says. "I knew nothing could be as bad as what they went through."

Every branch of the military came calling; Schaut chose the Army because it offered the best pay and sharpest dress blues. She went through basic at Fort Sam Houston in Texas and was posted to Letterman General Hospital in San Francisco, where she did postgraduate work in surgical nursing. After a short stint at Fort Lewis, she pushed for an assignment to Vietnam. "I went down to Personnel and said, 'I don't care who you send me

with. I want to go."

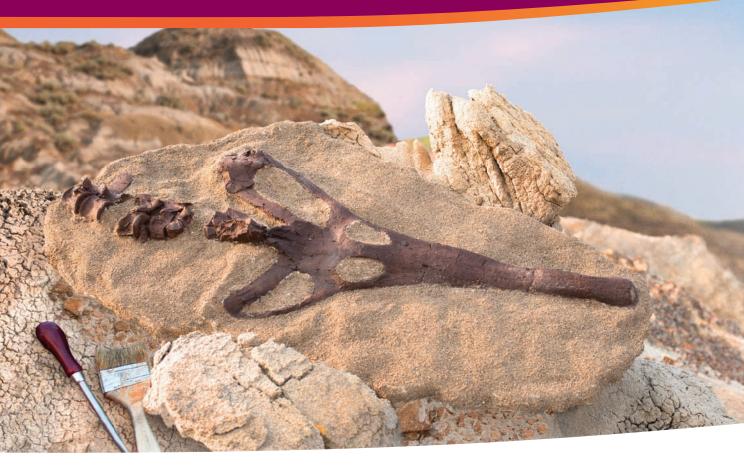


American Legion Post 49 in Emmett, Idaho, is named for Janie Schaut's second cousin, Lawrence Dresser, who was the city's first soldier to die in World War I. Photo courtesy Janie Schaut

CAMP ARMPIT The Army wasn't ready for the 93rd Evacuation Hospital group when it arrived at a decimated patch of jungle north of Saigon in October 1965, which Schaut's group dubbed Camp Armpit. For nearly three months they lived in tents, fought mud and monsoons, pooled their gelatinous cans of disintegrating C-rations and waited for the Army to build Quonset huts to house the hospital. The first mass casualties arrived on Christmas: 150 men from the 25th Infantry the nurses had exchanged gifts with earlier in the day. "We grew up quickly – and we sort of grew old quickly," Schaut says. "You can't see so many wounded guys and not think about your own mortality."

She also gained an unflappable confidence that propelled her through a career as a surgical nurse.

For people with a higher risk of stroke due to Atrial Fibrillation (AFib) not caused by a heart valve problem



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IMPORTANT SAFETY INFORMATION:

- Do not stop taking ELIQUIS for atrial fibrillation without talking to the doctor who prescribed it for you. Stopping ELIQUIS increases your risk of having a stroke. ELIQUIS may need to be stopped, prior to surgery or a medical or dental procedure. Your doctor will tell you when you should stop taking ELIQUIS and when you may start taking it again. If you have to stop taking ELIQUIS, your doctor may prescribe another medicine to help prevent a blood clot from forming.
- ELIQUIS can cause bleeding, which can be serious, and rarely may lead to death.
- You may have a higher risk of bleeding if you take ELIQUIS and take other medicines that increase your risk of bleeding, such as aspirin, NSAIDs, warfarin (COUMADIN®), heparin, SSRIs or SNRIs, and other blood thinners. Tell your doctor about all medicines, vitamins and supplements you take. While taking ELIQUIS, you may bruise more easily and it may take longer than usual for any bleeding to stop.

- Get medical help right away if you have any of these signs or symptoms of bleeding:
 - unexpected bleeding, or bleeding that lasts a long time, such as unusual bleeding from the gums; nosebleeds that happen often, or menstrual or vaginal bleeding that is heavier than normal
 - bleeding that is severe or you cannot control
 - red, pink, or brown urine; red or black stools (looks like tar)
 - coughing up or vomiting blood or vomit that looks like coffee grounds
 - unexpected pain, swelling, or joint pain; headaches, feeling dizzy or weak
- ELIQUIS is not for patients with artificial heart valves.
- Spinal or epidural blood clots (hematoma). People who take ELIQUIS, and have medicine injected into their spinal and epidural area, or have a spinal puncture have a risk of forming a blood clot that can cause long-term or permanent loss of the ability to move (paralysis).

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- 2 ELIQUIS had less major bleeding than warfarin.
- **3** Unlike warfarin, there's no routine blood testing.

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You are encouraged to report negative side effects

This risk is higher if, an epidural catheter is placed in your back to give you certain medicine, you take NSAIDs or blood thinners, you have a history of difficult or repeated epidural or spinal punctures. Tell your doctor right away if you have tingling, numbness, or muscle weakness, especially in your legs and feet.

- Before you take ELIQUIS, tell your doctor if you have: kidney or liver problems, any other medical condition, or ever had bleeding problems. Tell your doctor if you are pregnant or breastfeeding, or plan to become pregnant or breastfeed.
- Do not take ELIQUIS if you currently have certain types of abnormal bleeding or have had a serious allergic reaction to ELIQUIS. A reaction to ELIQUIS can cause hives, rash, itching, and possibly trouble breathing. Get medical help right away if you have sudden chest pain or chest tightness, have sudden swelling of your face or tongue, have trouble breathing, wheezing, or feeling dizzy or faint.

of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see additional Important Product Information on the adjacent page.

Individual results may vary.

Visit ELIQUIS.COM or call 1-855-ELIQUIS

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IMPORTANT FACTS about ELIQUIS® (apixaban) tablets

The information below does not take the place of talking with your healthcare professional. Only your healthcare professional knows the specifics of your condition and how ELIQUIS may fit into your overall therapy. Talk to your healthcare professional if you have any questions about ELIQUIS (pronounced ELL eh kwiss).

What is the most important information I should know about ELIQUIS (apixaban)?

For people taking ELIQUIS for atrial fibrillation: Do not stop taking ELIQUIS without talking to the doctor who prescribed it for you. Stopping ELIQUIS increases your risk of having a stroke. ELIQUIS may need to be stopped, prior to surgery or a medical or dental procedure. Your doctor will tell you when you should stop taking ELIQUIS and when you may start taking it again. If you have to stop taking ELIQUIS, your doctor may prescribe another medicine to help prevent a blood clot from forming.

ELIQUIS can cause bleeding which can be serious, and rarely may lead to death. This is because ELIQUIS is a blood thinner medicine that reduces blood clotting.

You may have a higher risk of bleeding if you take ELİQUIS and take other medicines that increase your risk of bleeding, such as aspirin, nonsteroidal anti-inflammatory drugs (called NSAIDs), warfarin (COUMADÍN®), heparin, selective serotonin reuptake inhibitors (SSRIs) or serotonin norepinephrine reuptake inhibitors (SNRIs), and other medicines to help prevent or treat blood clots.

Tell your doctor if you take any of these medicines. Ask your doctor or pharmacist if you are not sure if your medicine is one listed above.

While taking ELIQUIS:

- you may bruise more easily
- it may take longer than usual for any bleeding to stop

Call your doctor or get medical help right away if you have any of these signs or symptoms of bleeding when taking ELIQUIS:

- unexpected bleeding, or bleeding that lasts a long time, such as:
 - unusual bleeding from the gums
 - nosebleeds that happen often
 - menstrual bleeding or vaginal bleeding that is heavier than normal
- bleeding that is severe or you cannot control
- red, pink, or brown urine
- red or black stools (looks like tar)
- cough up blood or blood clots
- vomit blood or your vomit looks like coffee grounds
- unexpected pain, swelling, or joint pain
- headaches, feeling dizzy or weak

ELIQUIS is not for patients with artificial heart valves.

Spinal or epidural blood clots (hematoma). People who take a blood thinner medicine (anticoagulant) like ELIQUIS, and have medicine injected into their spinal and epidural area, or have a spinal puncture have a risk of forming a blood clot that can cause long-term or permanent loss of the ability to move (paralysis). Your risk of developing a spinal or epidural blood clot is higher if:

- a thin tube called an epidural catheter is placed in your back to give you certain medicine
- you take NSAIDs or a medicine to prevent blood from clotting
- you have a history of difficult or repeated epidural or spinal punctures
- you have a history of problems with your śpine or have had śurgery on your spine

If you take ELIQUIS (apixaban) and receive spinal anesthesia or have a spinal puncture, your doctor should watch you closely for symptoms of spinal or epidural blood clots or bleeding. Tell your doctor right away if you have tingling, numbness, or muscle weakness, especially in your legs and feet.

What is ELIQUIS?

ELIQUIS is a prescription medicine used to:

- reduce the risk of stroke and blood clots in people who have atrial fibrillation.
- reduce the risk of forming a blood clot in the legs and lungs of people who have just had hip or knee replacement surgery.
- treat blood clots in the veins of your legs (deep vein thrombosis) or lungs (pulmonary embolism), and reduce the risk of them occurring again.

It is not known if ELIQUIS is safe and effective in children.

Who should not take ELIQUIS? Do not take ELIQUIS if you:

- currently have certain types of abnormal bleeding
- have had a serious allergic reaction to ELIQUIS. Ask your doctor if you are not sure

What should I tell my doctor before taking **ELIQUIS?**

Before you take ELIQUIS, tell your doctor if you:

- have kidney or liver problems
- have any other medical condition
- have ever had bleeding problems
- are pregnant or plan to become pregnant. It is not known if ELIQUIS will harm your unborn baby
- are breastfeeding or plan to breastfeed. It is not known if ELIQUIS passes into your breast milk. You and your doctor should decide if you will take ELIQUIS or breastfeed. You should not do both

Tell all of your doctors and dentists that you are taking ELIQUIS. They should talk to the doctor who prescribed ELÍQUIS for you, before you have any surgery, medical or dental procedure. Tell your doctor about all the medicines you take, including prescription and over-thecounter medicines, vitamins, and herbal supplements. Some of your other medicines may affect the way ELIQUIS (apixaban) works. Certain medicines may increase your risk of bleeding or stroke when taken with ELIQUIS.

How should I take ELIQUIS?

Take ELIQUIS exactly as prescribed by your doctor. Take ELIQUIS twice every day with or without food, and do not change your dose or stop taking it unless your doctor tells you to. If you miss a dose of ELIQUIS, take it as soon as you remember, and do not take more than one dose at the same time. **Do not run out** of ELIQUIS. Refill your prescription before you run out. When leaving the hospital following hip or knee replacement, be sure that you will have ELIQUIS available to avoid missing any doses. If you are taking ELIQUIS for atrial fibrillation, stopping ELIQUIS may increase your risk of having a stroke.

What are the possible side effects of **ELIQUIS?**

- See "What is the most important information I should know about ELIQUIS?"
- ELIQUIS can cause a skin rash or severe allergic reaction. Call your doctor or get medical help right away if you have any of the following symptoms:
 - chest pain or tightness
 - swelling of your face or tongue
 - trouble breathing or wheezing
 - feeling dizzy or faint

Tell your doctor if you have any side effect that bothers you or that does not go away.

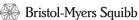
These are not all of the possible side effects of ELIQUIS. For more information, ask your doctor or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088

This is a brief summary of the most important information about ELIQUIS. For more information, talk with your doctor or pharmacist, call 1-855-ELIQUIS (1-855-354-7847), or go to www.ELIQUIS.com.

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To date, Schaut has written more than 14,000 pages of personal histories for Gem County veterans. A decade ago, she set aside a memoir about her own service in Vietnam to pen a biography of Lawrence Dresser for the Emmett American Legion post. Soon she found herself immersed in researching the records of hundreds of other local servicemembers. Katherine Jones John Statesman

But her return to the United States was difficult. She was sent to DeWitt Army Hospital at Fort Belvoir, Va., where she helped treat soldiers injured by antiwar protesters in October 1967. "It was a strange experience to be in America," Schaut says. "I don't resent the people who were antiwar. I just didn't understand them."

With some matchmaking help from their fathers, she ran into a high school classmate named Paul Schaut while home for Christmas a couple of months later. Paul was stationed in Boston after a tour with the Brown Water Navy in Vietnam, and Janie was headed to Florida when she got out of the Army. They dated "up and down the East Coast for the next two years" and married at her parents' home in Emmett in 1969.

The couple migrated to the Seattle area, where Paul became a software engineer and Janie continued her nursing career.

HOMECOMING About 2004, the late Jim Olson, then commander of the Emmett American Legion post, called seeking information about its World War I namesake. Schaut turned to her father to refresh the stories she'd heard about Lawrence Dresser as a child. A volunteer with the Idaho National Guard, Dresser was nicknamed "Taps"

because of his ability to play the bugle more beautifully than anyone else, according to news accounts. He served along the Mexican border with Gen. John "Black Jack" Pershing's expeditionary force in 1916. Dresser then went to France in World War I and drowned in the Lille River in August 1918. His headstone in Emmett Cemetery, where he was re-interred in 1921, has an engraving of a bugle.

Olson's call prompted Schaut to put aside a memoir she was writing about her own service in Vietnam to compile a biography of Dresser for Post 49. That led her to update the records of veterans buried in Emmett Cemetery when she moved back in 2007.

"The American Legion gave me a list of 942 veterans," Schaut says. "I started walking all the rows of the cemetery – there's 9,400 and some people buried there – and I knew there were many more veterans not on the list." For the next year, she read every available Gem County obituary from 1873 forward and discovered another 350 veterans buried in Emmett alone.

Word of Schaut's expertise got around. Soon people were stopping her at the grocery store or catching her at the museum to ask her to write about the uncle who died on Iwo Jima or the brother who was killed in Korea. Olson was an instigator, cheerleader and advocate as the number of biographies grew.

"I've tried to get the hometown kids," Schaut explains. "As long as they have lived in Gem County. As long as they served on active duty."

Schaut's subjects include veterans from the Civil War to the post-9/11 era. There's a circa-1900s governor of Idaho and a colonel whose Air Force career spanned propeller-driven airplanes to nuclear missiles. Glen Newell was one of the longest-held prisoners in World War II. The Hosoda brothers served with the highly decorated 442nd Infantry Division, one killed in Germany and the other in Italy.

Then there are Schaut's miracle men – guys like Fred Ashley whose stories barely amount to a hard-earned page of information until a stranger or distant relative contacts her out of the blue with a trove of letters, including one Ashley wrote to reassure his mother he was fine shortly before he was killed by Nazis in Czechoslovakia. Schaut even received a footlocker of memorabilia about one veteran from an anonymous donor.

Where appropriate, Schaut compiles a family album that tells the story of each generation's veterans. The Grattons' story includes 15 family members who served from World War I to the war on terrorism. The Forrester family covers seven veterans, including the father who went to World War I with the Army and then advised his sons to join the Navy and avoid the horrors of trench warfare.

The biographies average 150 pages and are sweeping in detail and depth. Often working until 2 or 3 in the morning, Schaut includes photos, a detailed history of the veteran's military unit, maps of the major battles in which they fought, letters home and, where appropriate, a copy of the telegram from the War Department with news of the missing or dead. When Schaut gets stuck for a photo, she often heads down to a breakfast place called The Rumor Mill, where owner Eltona Henderson displays the photos of more than 700 veterans.

The result of this incredible volunteer work is more than 14,000 pages of personal histories in 74 volumes in a special collection at the Gem County Historical Museum in Emmett. Schaut's husband keeps a digital archive of her work, scans maps and photos, and is her full-time tech guy.

"I consider the computer the work of the devil," she says. "Paul gets me out of trouble."

Schaut's work has been recognized by the Idaho

Military Department, the mayor of Emmett, U.S. Sen. Mike Crapo and the Daughters of the American Revolution. Shortly before Olson died, Schaut received the Esto Perpetua Award, the Idaho State Historical Society's highest history honor – a recognition for which he nominated her. Schaut doesn't do it for the awards, but for the veterans, she emphasizes. And she hopes her work will inspire other communities to write biographies of their veterans.

Schaut is most proud of the biography she penned about her husband's uncle, William Kirby, a Marine aviator killed in the Battle of Savo Island in World War II. There's also the research she compiled about Ron Rekow, a waist gunner and engineer on a B-24 who still runs a barbershop in Emmett. Rekow was troubled by a customer who convinced him that U.S. bombers had sunk a Japanese "hell ship" carrying American prisoners, including two Gem County lads. Schaut proved the customer wrong.

"I went down and told Ron, 'You know all that guilt you've been carrying all these years? You didn't sink that ship. You were never anywhere close. A submarine did."

Families often first discover what their loved one endured through Schaut's work. Cindy Gorino finally learned the story of her father, who was killed in a logging accident when she was 4. Because her mother drowned six months after her father's death, Gorino had only a few military records and a long list of questions – until Schaut showed up on her doorstep with her father's biography.

"It's tearful to see every place he had gone – Normandy – and this horrifying prisoner of war camp they liberated," Gorino says. She used the information Schaut complied to apply for the medals her father earned and is having a box built to display them in her home.

Robert Sawyer first saw photos of his father, Charles, from the elder Sawyer's service with the Flying Tigers because of the biography Schaut complied. But he speaks of a larger sense of gratitude.

"For my family, we appreciate the public acknowledgement of what my father did," says Sawyer, who is a Vietnam War Navy veteran. "But it's good for the community to be reminded what its sons and daughters did for Gem County, Idaho – and the rest of the country."

Ken Olsen is a frequent contributor to The American Legion Magazine.



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AMERICA AT MARICA AT

A chronology of U.S. military interventions and the prices paid.

U.S. soldiers of the 18th Infantry Machine
Gun Battalion advance through the ruins
of St. Baussant, France, on their way to
the St. Mihiel front. GRU

he world has known many kinds of war – the Hundred Years' War and a "hundred-hour war," the Seven Years' War and the Six-Day War, cold wars and phony wars, great wars and "splendid little wars."

Whatever anyone wants to call it, the truth is that war is part of humanity. It can be limited or deterred. But it cannot be outlawed like a crime because there's no consensus on who should play judge, and there's waning interest in the role of sheriff. Nor can it be cured like a disease because of the very nature of man, as some of history's greatest thinkers have concluded. "There is a time for war and a time for peace," Solomon wrote.

America's generals are seldom so matter-of-fact about war. William Tecumseh Sherman called it "hell." Robert E. Lee said it was "terrible." Dwight Eisenhower deplored it for "its brutality, its futility, its stupidity."

Drawn from various sources, including the Congressional Research Service (CRS), Congressional Budget Office (CBO), Department of Defense, Veterans Museum and Memorial Center, Smithsonian Institution and media outlets, the following is not an exhaustive catalog. After all, a CRS index of U.S. military intervention tallies some 330 "notable deployments of U.S. military forces overseas" since 1798. This list does not include, for instance, myriad limited military engagements – blockades, humanitarian airdrops, rescue operations, raids and drone strikes. But by highlighting the vital statistics of our most consequential and/or costly military engagements, it traces war's impact on America.



"The Delaware Regiment at the Battle of Long Island," by Domenick D'Andrea Wikimedia Commons

REVOLUTIONARY WAR, 1775-1783

U.S. military deaths: 4,435 **U.S. wounded:** 6,188

Cost: \$101 million in 1770s dollars

The 4,435 war deaths represent almost 0.2 percent of the population at the time. While the United States didn't technically have a U.S. gross domestic product (GDP) in 1775, we can get a sense of the war's enormous economic costs by extrapolating from the GDP in 1790, when the entire nation's wealth totaled only \$189 million.

BARBARY WARS, 1801-1805 AND 1815

U.S. military deaths: 35 **U.S. wounded:** 64

In 1795, the United States paid almost \$1 million to ransom 115 sailors. Thomas Jefferson bitterly opposed this policy and overturned it as president, declaring, "It will be more easy to raise ships and men to fight these pirates into reason, than money to bribe them."

WAR OF 1812, 1812-1815

U.S. military deaths: 2,260 U.S. wounded: 4,505 Total serving: 286,730

Cost: \$90 million (2.2 percent of GDP in peak year)

After defeating the British Empire less than 30 years earlier, the young republic was soundly swatted back into place in 1812. U.S. forces were routed in Canada, U.S. vessels seized, U.S. ports blockaded, and the Capitol and White House set ablaze. Congress declared war against Britain in June 1812.

INDIAN WARS, 1813-1838 AND 1866-1890

U.S. military deaths: 1,000 **Total serving:** 106,000

We know that some 4,000 Cherokee died during their forced westward migration in 1838. But estimates range wildly about the number of Native Americans who died in the frontier wars.

MEXICAN WAR, 1846-1848

U.S. military deaths: 13,283 (1,733 battle deaths)

U.S. wounded: 4,152 Total serving: 78,718

Cost: \$71 million (1.4 percent of GDP in peak year)

To put pressure on Mexico, President James Polk sent Gen. Zachary Taylor to a disputed area between the Rio Grande, where the United States defined the border, and the Nueces River, where Mexico defined it. To Mexican troops this was an act of aggression, and they attacked Taylor's forces. Congress declared war against Mexico in May 1846, after only a few hours of debate.

CIVIL WAR, 1861-1865

Union military deaths: 364,511 (140,414 battle deaths)

Union wounded: 281,881

Confederate military deaths: 133,821

Union cost: \$3.18 billion (11.3 percent of GDP in peak year) **Total serving:** 2,213,363 (Union); 1,082,119 (Confederate)

SPANISH-AMERICAN WAR, 1898

U.S. military deaths: 2,446 (385 battle deaths)

U.S. wounded: 1,662

Cost: \$283 million (1.1 percent of GDP in peak year)

Total serving: 306,760

Long before U.S. forces rescued post-tsunami Sumatra, triaged postwar Bosnia, fed Somalia, protected Kosovo and Kurdistan, and defended Libyans from Gaddafi or Yazidis from the Islamic State, Theodore Roosevelt argued against "coldblooded indifference to the misery of the oppressed." Even when "our own interests are not greatly involved," he declared, "action may be justifiable."

The American people took such action as Spain crushed Cuban independence efforts – arguably America's first humanitarian war. Of course, the war also had strategic implications, as Washington used Spain's mistreatment of Cuba as a pretext to move against Spanish possessions in the Philippines, Puerto Rico and Guam. Following the sinking of USS *Maine*, Congress declared war in April 1898.

PHILIPPINES, 1899-1901

U.S. military deaths: 4,200 U.S. wounded: 2,800 Total serving: 120,000

Not unlike the Iraq war a century later, the postwar occupation of the Philippines led to an insurgency that proved far bloodier than the initial conflict.

MEXICO, 1914-1919

U.S. military deaths: 21 U.S. civilian deaths: 35 **U.S. forces deployed:** 6,000

Supporting anti-government revolutionaries inside Mexico, President Woodrow Wilson ordered U.S. troops to seize the port at Veracruz and prevent the shipment of German arms to the Mexican government. The government was ousted, just as Wilson wanted. But when the new government proved too independent for Wilson, he began supporting forces under the command of Pancho Villa. When Wilson recognized the Mexican government, the spurned Villa launched raids into the United States, killing dozens of American civilians. Wilson then ordered Gen. John Pershing to lead an expedition into Mexico to kill or capture Villa, but events in Europe soon trumped all other matters of foreign policy.

WORLD WAR I, 1917-1918

U.S. military deaths 116,516 (53,402 battle deaths)

U.S. wounded: 204,002 **Total serving:** 4.73 million

Cost: \$20 billion (13.6 percent of GDP in peak year)

Congress declared war on Germany and Austria-Hungary in 1917, after Germany resumed unrestricted submarine warfare and tried to lure Mexico into the war against the United States.

COLD WAR, 1947-1991

Total serving: 35 million

Cost: \$4.65 trillion (14.2 percent of GDP in peak spending

year, 1953)

BERLIN AIRLIFT, 1948-1949

U.S. military deaths: 31 Peak U.S. troop level: 32,900 **Cost:** \$224 million (\$2.2 billion today)

Blending the principles of strategic bombing with the efficiency of a Detroit assembly line, Lt. Gen. Curtis LeMay crafted an air campaign unlike any in history. From June 1948 to September 1949, Allied pilots flew 277,000 missions and delivered 2.3 million tons of supplies to Berlin. About 75 percent of those missions were flown by Americans.

KOREAN WAR, 1950-1953

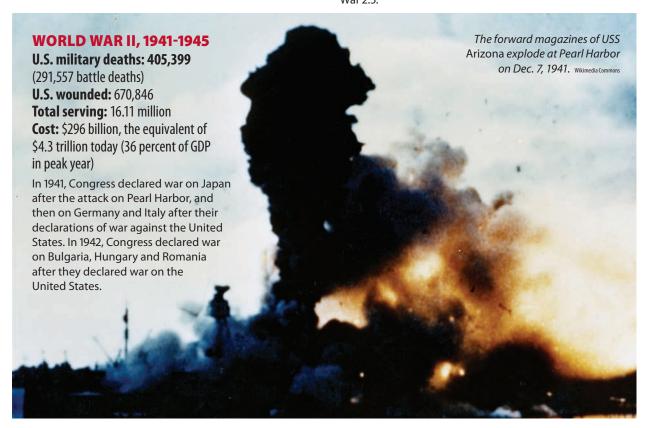
U.S. military deaths: 36,574 (33,739 battle deaths)

U.S. wounded: 103,284

Total serving in theater: 1,789,000

Cost: \$30 billion (4.2 percent of GDP in peak year)

The war's economic cost as a percentage of GDP and battle deaths as a percentage of total military deaths underscore why The New York Times called Korea "World War 2.5."



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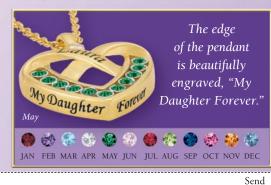
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Please print clearly.	
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VIETNAM WAR, 1965-1975

U.S. military deaths: 58,220 (47,434 battle deaths)

U.S. wounded hospitalized: 153,303

Cost: \$111 billion (2.3 percent of GDP in peak year)
Total serving in Southeast Asia: 3,403,000

Congress authorized President Lyndon Johnson to use "all necessary measures" against North Vietnam in 1964, after U.S. warships came under apparent attack in the Gulf of Tonkin. When Johnson asked military leaders what they needed to win, the answer was seven years, 700,000 to 1 million troops and an unfettered air campaign. Instead, Johnson and President Richard Nixon launched a combined 16 bombing pauses and 72 peace initiatives, thus undercutting battlefield momentum.

A Marine from 1st Battalion, 3rd Marines, moves a Viet Cong suspect to the rear during a search-and-clear operation west of Da Nang Air Base. Wikimedia Commons

LEBANON, 1982-1984

U.S. military deaths: 265 U.S. wounded: 177

Total deployed ashore: 1,800

President Ronald Reagan deployed 1,200 Marines to Lebanon as part of a congressionally authorized multinational peacekeeping force. Also deployed were elements of the 6th Fleet, including USS *New Jersey*, which unloaded its 16-inch guns during the campaign, and the carriers *Independence* and *John F. Kennedy*, which launched airstrikes into the war zone. On Oct. 23, a truck loaded with explosives rammed into the Marine barracks in Beirut, killing 241 Americans.

GRENADA, 1983

U.S. military deaths: 19 (18 battle deaths)

U.S. wounded: 116 Total deployed: 5,000

Reagan deployed U.S. forces to Grenada to rescue U.S. citizens, reverse a Cuban-backed coup and restore order. U.S. forces discovered 800 Cuban advisers and enough weaponry to arm 10,000 troops.

PERSIAN GULF, 1987-1988

As the Iran-Iraq War spilled into the Persian Gulf, the two belligerents began attacking commercial shipping. Iranian fighters strafed Kuwaiti tankers. Iran boarded a U.S. civilian ship. An Iraqi warplane attacked USS *Stark*, killing 37 sailors. To protect Kuwaiti vessels from the maelstrom, the United States began reflagging and escorting Kuwaiti ships. In April 1988, USS *Samuel B. Roberts* struck an Iranian mine northeast of Qatar. The attack prompted Reagan to order Operation Praying Mantis. "By the end of the operation, U.S. air and surface units had sunk or severely damaged half of Iran's operational fleet," a Navy report details.

PANAMA, 1989-1990

U.S. military deaths: 23 U.S. wounded: 322 Total deployed: 26,000

In December 1989, President George H.W. Bush dispatched U.S. troops to protect American citizens, restore Panama's democratically elected government and apprehend Gen. Manuel Noriega, who had been involved in drug trafficking, weapons smuggling and a campaign of violence against his political opponents.

GULF WAR, 1990-1991

U.S. military deaths: 382 (147 battle deaths)

U.S. wounded: 467

Total serving in theater: 694,550

Cost: \$61 billion*

The United States led a large international coalition to defend Saudi Arabia from attack (Desert Shield) and eject Saddam Hussein's military from Kuwait (Desert Storm). Congress passed an authorization for use of military force (AUMF). An asterisk is attached to the cost of the war because it was largely underwritten by international partners.

IRAQI KURDISTAN, 1991

U.S. military deaths: 5
Peak U.S. troop level: 12,316

When Hussein moved against Kurdish minorities at the end of the first Gulf War, Bush dispatched U.S. forces to mount a massive humanitarian operation in northern Iraq. U.S. forces rescued 400,000 Kurds from starvation. The five American deaths came in the initial phase of Operation Provide Comfort and were caused by land mines, weapons misfires and transport accidents. The total-serving number is limited

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to the initial months of Provide Comfort. Follow-on operations continued in Iraqi Kurdistan for years: GAO reported \$320.5 million spent on Provide Comfort in 1991. As late as 1996, Congress was still appropriating \$143 million for Provide Comfort. No-fly zones over northern and southern Iraq were an outgrowth of Provide Comfort. Maintaining these protective umbrellas – and the related sanctions-and-inspections regime – cost \$13 billion annually through 2002.

SOMALIA, 1992-1994

U.S. military deaths: 43 Peak U.S. troop level: 28,000

Cost: \$2.22 billion (fiscal 1992-fiscal 1995)

Acting in response to U.N. resolutions, Bush dispatched 28,000 troops to Somalia in the closing hours of his presidency to protect food shipments from tribal warfare and looting. But in 1993, the United Nations expanded the limited humanitarian mission into an ambitious nation-building effort. When Somali clans ambushed U.N. peacekeepers, President Bill Clinton sent hundreds of U.S. Army Rangers and Delta Force operators into Mogadishu to apprehend clan leaders, leading to the bloody "Black Hawk Down" episode and triggering the beginning of the end of America's mercy mission in Somalia.

HAITI, 1994-1996

U.S. military deaths: 4 (all non-hostile)

U.S. troops: 16,253 (plus 11,773 in the "joint-operations area")

Cost: \$2 billion

Clinton dispatched troops to Haiti to restore the democratically elected president to office and stabilize the troubled country. This was nothing new: U.S. forces intervened 16 times in Haiti between 1900 and 1913, before a lengthy occupation from 1915 to 1934. President George W. Bush sent troops into Haiti in 2004, as did President Barack Obama in 2010.

BOSNIA, 1995-2004

Total serving: 100,000

Cost: \$14.83 billion (fiscal 1992-fiscal 2004)

Between 1992 and 1995, the war in Yugoslavia claimed 250,000 people. It wasn't until a U.S.-led air armada was allowed to take the offensive against Serbian militiamen in late 1995 that Serb strongman Slobodan Milosevic finally came to the peace table. In December 1995, Clinton ordered the deployment of 25,000 troops to Bosnia as part of NATO's follow-on peacekeeping operation. By the latter half of 2003, the United States had sustained only one hostile fatality, CRS reports. The last U.S. troops withdrew in December 2004.



U.S. soldiers take cover during a firefight with guerrilla forces in Baghdad. Wikimedia Commons

GLOBAL WAR ON TERRORISM / OPERATION ENDURING FREEDOM (OEF) / OPERATION FREEDOM'S SENTINEL / OPERATION RESOLUTE SUPPORT, 2001-PRESENT

U.S. military and DoD civilian deaths: 2,355 as of

March 2015 (1,845 battle deaths) **U.S. military wounded:** 20,067

Americans/friendly foreign nationals killed

on Sept. 11, 2001: 2,976 Total serving: 2.5 million+

As CRS details, the Bush and Obama administrations have reported "U.S. anti-terror related activities" in Kenya, Ethiopia, Eritrea, Afghanistan, Pakistan, the Philippines, Georgia, Yemen, Iraq, Djibouti and Somalia. In addition, DoD reports that OEF casualties have occurred in Guantanamo Bay (Cuba), Djibouti, Eritrea, Ethiopia, Jordan, Kenya, Kyrgyzstan, Pakistan, Philippines, Seychelles, Sudan, Tajikistan, Turkey, Uzbekistan and Yemen. This explains the differing casualty numbers for what might be called "OEF-Global" and "OEF-Afghanistan." OEF officially gave way to Operation Freedom's Sentinel and Operation Resolute Support in Afghanistan in late 2014. Congress passed an AUMF in September 2001. According to the 9/11 Commission, "Calling this struggle a war accurately describes the use of American and allied armed forces to find and destroy terrorist groups and their allies in the field."

KOSOVO, 1999-PRESENT

U.S. troops deployed during hostilities: 31,600

Cost: \$9.56 billion (1999-2004)

When Milosevic tried to repeat in Kosovo what he had perpetrated in Bosnia, NATO launched a 78-day air campaign targeting his army and government. Milosevic's regime was mortally wounded, and 850,000 Kosovar refugees returned home. Two U.S. pilots were killed when their helicopter crashed in Albania. In addition, during the first year of the peacekeeping mission, three U.S. troops died in accidental deaths and 24 were injured. About 660 U.S. troops remain in Kosovo, down from 7,000 in 1999.

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AFGHANISTAN, 2001-PRESENT

U.S. military deaths: 2,215 as of March 2015 (1,832 battle deaths)

U.S. military wounded: 20,026 Total serving: 831,576 (as of May 2014)

Cost: \$825.7 billion (0.7 percent of GDP in peak year)

The war in Afghanistan began Oct. 7, 2001. Within weeks, U.S. forces, in conjunction with an indigenous alliance of anti-Taliban militia, toppled the Taliban regime. Then U.S. troop levels in Afghanistan began to increase: 1,300 in 2001, 10,000 in 2003, 20,000 in 2006 and hitting a wartime high of 100,000 in 2010. CBO estimates that an additional \$1 trillion will be appropriated from 2015 to 2024 "for military operations and diplomatic activities in Afghanistan and other possible overseas contingency operations."

IRAQ / OPERATION IRAQI FREEDOM/ OPERATION NEW DAWN, 2003-2011

U.S. military and DoD civilian deaths: 4,491

(3,529 battle deaths) **U.S. wounded:** 32,244 **Total serving:** 1.5 million+
(March 2003-December 2011)

Cost: \$820 billion (1 percent of GDP in peak year)

Congress authorized military action against Iraq in October 2002, citing "Iraq's ongoing support for international terrorist groups" and "development of weapons of mass destruction." Saddam Hussein's army and regime were quickly routed, but Iraq's postwar war proved costly. And the costs continue to mount.

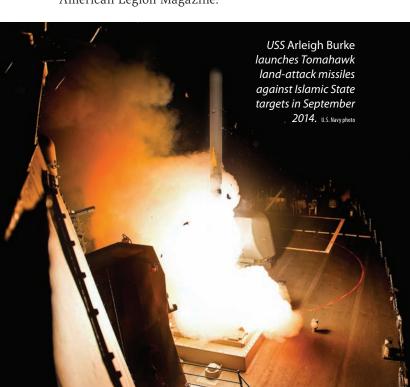
OPERATION INHERENT RESOLVE, 2014-PRESENT

U.S. military deaths: 3 (as of March 2015)

Cost: \$8.4 million per day

The earlier-stated casualty numbers and economic figures from the Iraq war do not enfold the U.S. military campaign in Iraq and Syria targeting the Islamic State. With military commanders expecting the operation to last more than three years, Iraq promises to dominate the balance of Obama's presidency, just as it did the previous three administrations. This August will mark 25 years that the United States has been wrestling with Iraq.

Alan W. Dowd is a contributing editor for The American Legion Magazine.



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OUR FABRICATED The 3D printing revolution will transform how we live - and how we fight.



rom the factory floor to outer space to the front lines of medical care and the battlefield, 3D printers are changing how, where, what and how quickly objects can be manufactured.

As the technologies continue to improve and drop in price, military interest and investment in 3D printing is increasing dramatically. While most applications for military 3D printing are in the experimental phase, potential future applications range from making on-demand mission-critical replacement parts and food to printing customized prosthetic limbs – and, someday, living tissue to help wounded soldiers and veterans heal.

More formally known as "additive manufacturing," 3D printing is a digital manufacturing process that fabricates physical objects by carefully adding material, layer by layer, according to a digital blueprint. Objects can be printed in plastic, ceramic and even metal (such as stainless steel and titanium). When the situation calls for a custom part to be made according to exact and unique specifications or manufactured on the spot – or, in some cases, both – 3D printing shines.

In the civilian world, 3D printing is catching on fastest in industries where customers are willing to pay a premium for special-order, custom-made objects, whether a replacement machine part for a vintage automobile or a custom hearing-aid insert. Aerospace manufacturers are beginning to adopt the technology for making complex aircraft parts like lightweight frame components and optimized fuel injectors. Although the circumstances differ, military personnel could also take advantage of 3D printing's capacity for rapidly and automatically manufacturing custom parts and objects made out of a wide range of raw materials.

Two unique characteristics set 3D printing apart from traditional manufacturing processes. First, unlike traditional manufacturing techniques that carve away or mold raw material into shape, a 3D printer forms objects by adding, depositing or solidifying raw material – be it polymer, metal, living cells or food – into precisely placed layers. Second, 3D printing is completely computerguided. With no error-prone human operator involved, a 3D printer is capable of automatically creating physical objects whose shape precisely matches the instructions laid out in the digital blueprint that guides the printer through its paces.

LEFT: A 3D printed stainless steel motor impeller contains curved cooling channels that cannot be manufactured in any other way. Photo by Hod Lipson

The process begins with a digital blueprint in the form of a file created in computer-aided design (CAD) software. In some cases, the blueprint may have originated in an optical scanner or medical imaging device like a CT scanner. Next, the digital blueprint is ported over to the 3D printer. Similar to the way a desktop inkjet printer formats an online document for printing, the 3D printer processes the digital blueprint by translating the digital description of the physical object into explicit printing instructions that will set the printer's machinery into motion.

Although the term "3D printing" has come into popular use, additive manufacturing is actually more descriptive of the way these machines form physical objects. Some 3D printers form objects by extruding soft raw material through a print head, typically molten plastic. In more exotic cases, foodstuff or even living cells safely encased inside a "squirtable bioink" gel can be processed. Other 3D printers don't actually print at all. This class of machines forms objects by aiming a laser, a thin spray of adhesive or a focused electron beam onto a bed of raw material – either powder or liquid polymer - that solidifies into an extremely thin layer. The process is repeated thousands of times until micron-scale layers build up into a fully formed object.

The cost of a 3D printer is determined by its manufacturing capacity. Small 3D printers that squeeze out slow streams of brightly colored plastic, popular with hobbyists and schools, cost about as much as a laptop. However, their use is limited to making crude plastic objects that don't need to meet high performance requirements, such as simple toys or replacement knobs for home appliances.

In contrast, an industry-grade additive manufacturing machine using laser or electron-beam technology to print specially engineered blends of ceramic, metal and patented polymers can cost well into six figures. These high-performance additive manufacturing machines, while costly, are used to manufacture machine components or orthopedic implants whose dimensions must meet exacting requirements at the micron scale.

LONG TIME COMING 3D printing is a classic example of an overnight success that was decades in the making. The first commercial 3D printers were available in the late 1980s. For its first 20 years, the technology was used by engineers and designers to make temporary plastic

prototypes of products that would later be manufactured using conventional mass-production processes. In the past decade, as printing materials have improved and metal printing has matured, designers and engineers are applying 3D printing to create real, functional parts. Currently, approximately 30 percent of 3D-printed parts are for end use.

After a slow start, 3D printing finally graduated to mainstream use thanks to a combination of forces, including dramatic improvements in computing power, easier-to-use design software, advances in novel materials and plummeting costs of the electronic components that go into machines. Today, the manufacturing machines people call "3D printers" span a sprawling and diverse family of technologies. Regardless of cost or manufacturing technique, what all 3D printers have in common is their appeal: additive manufacturing is an ideal method for making elaborately shaped custom parts or products in small batches.

3D PRINTING AND THE MILITARY What makes

3D printing an ideal mode of manufacturing for military applications? After all, revolutionary as it may be, 3D printing has very real and plentiful limitations. Unlike traditional factory manufacturing machines that efficiently carve or stamp out thousands of flawless, identical objects each day, 3D printing is a slow and expensive process. There's no widely accepted framework for verifying the performance and safety of 3D-printed parts. And the vast majority of 3D-printing technologies can handle only a single material – a grave limitation in a world where even the simplest products contain dozens of different components.

Business-model challenges are also a complicating factor. A frequently asked question is at what point the cost of 3D printing a product breaks even with the cost of mass-producing that same product. The answer depends on the complexity of the part and how many parts you need to make to achieve a profitable economy of scale. However, although the question of profitability vs. mass production is a worthwhile and interesting one, we think it's the wrong question to ask. A better one, particularly in the case of military applications, is what kind of new opportunities are opening up that up until now were not possible.

Despite its challenges, 3D printing is well suited for military applications because it's precise,

portable and – thanks to the computer-guided additive manufacturing process – can make unique and complex new shapes.

Another way to examine its potential value is by using a framework we call the "10 Disruptions of 3D Printing." These 10 principles took shape over the course of years of research with 3D-printing experts across different industries. We found that although the design and manufacturing challenges people were solving using 3D printing looked quite different on the surface, underneath they shared a set of similar patterns.

In our book "Fabricated," we distill these underlying similarities into 10 core characteristics:

- Manufacturing complexity is free. Making more complex shapes is not more expensive. For example, printing a shape with a hole, rounded corners and inscription is not more expensive than printing a rectangular block of the same weight.
- *Geometric variety is free*. Printing 50 identical items or 50 different items costs the same.
- No assembly required. Parts that typically required assembly of multiple components can be printed as a single monolithic unit. For example, the GE LEAP engine contains a fuel injector that is printed as a single unit, where previously it was made by assembling 20 parts. Reducing assembly cuts labor costs, tolerance errors, fasteners and failure points.
- Small manufacturing footprint. A 3D printer is portable and packs a lot of printing capacity per square foot. This make it ideal for printing jobs in the field.
- Lead time to product in hand is diminished. The duration between end of design and beginning of production is virtually eliminated, compared to traditional production methods that could require days, if not weeks or even months. This allows on-demand fabrication as well as rapid iteration.
- No skill required. The entirely computer-guided printing process means there's little technical skill required once the design blueprint has been created. Compared to traditional manufacturing processes that require quite a bit of training, this allows for use by ordinary personnel.
- Less waste. Metal printing is a precise and clean method for making objects, since it uses material only where it is needed. The "buy to fly" ratio (the amount of metal you need to buy compared to what ends up on an aircraft) is 1:2, compared to about 1:10 using traditional processes. This means less waste and less material shipping and storage.
- *Infinite shades of material*. It's possible to create precise new blends of raw materials to create novel

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Carolyn Lambeth, a mechanical engineer at Combat Direction Systems Activity Dam Neck, explains the process of additive manufacturing to sailors at the Navy's first Maker Faire, a series of workshops called "Print the Fleet," in 2014. "The quantity of supplies we carry on board could be reduced significantly if we 3D print those products on the ship," says Capt. Jim Loper of the Navy Warfare Development Center. "There really are no limits." U.S. Navy photo by Mass Communication Specialist Seaman Jonathan B. Trejo

materials that behave in unusual and interesting ways, sometimes surpassing the performance of the base materials. This is a new design space that has not been fully explored.

- Perfect replicability. 3D printing brings some of the freedom and repeatability of the digital world to the still largely analog processes of creating and copying physical objects. It is fairly easy to 3D scan an existing part and supplicate it, with or without modifications.
- *Zero constraints*. The additive nature results in a new design space, with new complex geometries that simply could not be made any other way.

FRONT-LINE PRINTING Considered within the framework of the "10 Disruptions," 3D-printed manufacturing is set to transform how the military manages three core challenges.

■ Maintaining equipment in remote locations. An ancient proverb sums it up nicely: "for want of a nail ... the kingdom was lost." 3D-printed manufacturing is an ideal tool for front-line manufacturing because a single 3D printer can form many different shapes, has a small manufacturing footprint and can print objects on the spot.

"One of the biggest challenges in the Army is that there is a huge logistics burden," writes Thomas Russell, director of the Army Research Laboratory. "If we could forward-deploy manufacturing capabilities, we would have the opportunity to manufacture parts in theater, or repair parts."

In addition, 3D-printed manufacturing would help cut the supply-chain cord for ships far out at sea or submarines submerged for long periods. Often, mundane parts urgently needed by sailors are out of stock. Replacing a part can involve placing a special order and waiting weeks. In a future scenario, if naval vessels were equipped with portable 3D printers, the process would work much more quickly. A sailor would download a design file from a database of replacement parts, print the part and, without missing a beat, continue the mission. Known as digital inventory, this process is relevant to many civilian industries also burdened by a long tail of parts.

Currently, front-line 3D-printed manufacturing is in the exploratory stages. In Afghanistan, the Army created two portable manufacturing centers called Expeditionary Labs, or "Ex Labs," that were housed inside 20-foot shipping containers. Each

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GovMint.com, 14101 Southcross Dr. W., Burnsville, MN 55337 pod had its own generator, scientist, engineer and assistant along with a plethora of manufacturing machines, including CAD software and a printer. If these early exploratory test beds prove successful, 3D-printed manfacturing could liberate soldiers stationed at remote forward operating bases from the bureaucratic chokehold of a military supply chain, potentially improving the "tooth-to-tail" ratio.

While front-line press-button manufacturing capacity could revolutionize the logistical burden that accompanies modern warfare, battlefield 3D printing faces the same formidable challenge faced by industrial manufacturers: most replacement parts are not made out of a single type of material. Whether you're trying to 3D print a replacement plastic knob for the dashboard of an armored vehicle or a metal gun component, the fact is that most parts are made from multiple raw materials or composites. Multi-material 3D printing will someday mature, but until then engineers and scientists will continue to experiment with printing techniques capable of blending together different raw materials into a single print job in a way that's reliable and repeatable.

One of the exciting opportunities afforded by front-line manufacturing is to allow soldiers in the field to modify and improve tools directly, based on firsthand experience. Design software that allows some form of customization could enable end users more control of the final product, allowing agile adaptation. While individual adaptation runs the risk of loss of standardization, such front-line innovations could find their way up to headquarters and, when appropriate, be disseminated more widely.

■ Healing the wounded. The same characteristics that make 3D printing useful on the front lines also make it a powerful tool to create replacement parts ... for people. In the civilian world, one of the earliest commercially successful applications of 3D printing has been the creation of custom medical devices. Market research firm SmarTech estimates that in 2014 alone, 1,100 3D printers were sold with the intent to be used to create hearing-aid inserts, surgical guides and models, and custom dental braces and crowns.

For years, the Walter Reed National Military Medical Center has been a pioneer in medical 3D printing, creating models for military surgeons. The center makes custom titanium cranial plates from medical scan data that's converted into a format suitable for 3D printing, then implants them into injured soldiers. It also prints polymer jigs for

use in surgery to precisely guide surgical tools and reduce errors.

One of the most exciting medical applications of 3D printing is the creation of living human tissue, a process known as bioprinting. The availability of increasingly detailed medical scan data, combined with the ability of a 3D printer to precisely place raw material, is opening up new frontiers in wound repair and tissue replacement. In particular, bioprinting shows promise as a technique to repair burn wounds suffered by soldiers in combat.

Bioprinting is a tissue engineering technique in which a machine equipped with several different syringes loaded with hydrogel is used to "print" living cells into place. First, the injured area is scanned to create a digital 3D map. Next, healthy cells are drawn from the injured person's body or sourced externally, then incubated and loaded into a special medical printer. The bioprinter then deposits different types of cells into a 3D configuration that after a period of incubation will grow into viable tissue.

Back in 2006, in our lab at Cornell, we were able to print a living meniscus of the knee. The meniscus lived in an incubator for three months, but it was not strong enough to serve in a functional knee. Since then, research groups at universities around the world have been working on improving the printing and incubation processes to produce implantable tissue.

It's likely that the first real application of bioprinting will be to create new skin and cartilage, since these relatively simple tissues contain no vascularity. As digital technology advances, scientists hope to someday print more complex organs such as kidneys and livers, for both implanting and for drug testing. To accelerate the development of bioprinting, the Department of Defense set up the Armed Forces Institute of Regenerative Medicine (AFIRM). This multiinstitutional team of 30 universities, military laboratories and investigators is developing technologies to replace or regenerate human skin cells, tissues and organs. Bioprinting is currently in the experimental stages and will require regulatory approval before the process can go into clinical trials.

■ Feeding the force. A cousin to bioprinting is food printing. When we first released our experimental open-source printer "Fab@Home" in 2006, we were surprised to see that people eagerly tried it out by printing food materials such as chocolate, cookie dough or cheese. Like bioprinting, food



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printing also involves working with a broad range of unwieldy materials that are difficult to deposit accurately. Initially, the 3D-printed cookies we toiled to make were dismissed as a frivolous side activity. However, a consistent trickle of interest from food companies and the public has proven that there may be more to food printing than meets the eye.

Much like conventional 3D printing, food printing is not about replacing mass production of food. Instead, the ability to print food and cook it inside a 3D printer enables the fabrication of fresh food and gives the software chef exquisite control over quantities and nutritional composition. Following the "10 Disruptions," food printing could allow the military to produce custom healthy food for its personnel with less waste, less training, less personnel and less infrastructure.

WHERE 3D PRINTING IS HEADED Today,

3D-printing technologies are in their early stages of adoption, similar to where computers were in the mid-1980s. When computers were new on the scene, many people knew that computing technology would disrupt a few processing-intensive activities – for example, accounting or military command and control. Few, however, were able to predict the broad range of ways in which computers would affect almost every aspect of our lives. Similarly, we can predict that 3D printing is going to open up new possibilities and disrupt conventional manufacturing, medicine and even cooking. Printers are becoming faster, cheaper and better every day. But where will this technology go next?

We can look at the progression of 3D printing in three stages. The first, one that is now maturing, is our ability to create, shape and form on demand. Today, almost any shape you can describe to a computer can be 3D printed, and that is in marked difference from most of history, when the shapes and forms we could manufacture reliably were limited by our manufacturing tools. We are now limited only by our imagination and our design tools. New design tools and, in particular, new design algorithms driven by artificial intelligence are needed to allow us to explore this vast new design space.

The second stage is the ability to create new "meta-materials" on printers by combining and patterning base materials. Just as millions of shades can be created by combining just three primary colors, a vast range of new materials can be created by combining a few primary materials

in new and interesting three-dimensional patterns. For example, we already know that it is possible to make meta-materials that are both stronger and lighter than any natural material. But the full range of 3D patterns' and potential materials' properties achievable is territory yet to be explored.

Finally, the third stage involves moving from printing passive parts to printing complete integrated, active systems. Most printers today can print only passive parts. But most real-life products involve multiple interacting components – not just structural materials, but electric wires, batteries, transistors, sensors and actuators. The ability to simultaneously 3D print multiple, integrated active materials would open the door to fabricating optimized systems on demand. This would move us from printing just replacement parts today to fabricating complete systems, such as an on-demand custom UAV or a robot that could walk out of the printer – batteries included.

Over the past 30 years, 3D-printed manufacturing has gradually risen from obscurity to become an advanced manufacturing process used by leading defense, aerospace and medical companies. Its unique characteristics disrupt several cost factors and logistical barriers associated with traditional mass manufacturing and medical engineering techniques. In the coming decades, as the technology continues to improve in performance and drop in price, 3D printing will fundamentally change the way physical objects are designed and made. For both civilians and military personnel, 3D-printing technologies have the potential to change life as we know it, shortening the length of supply chains and improving medical care and food production.

Hod Lipson and Melba Kurman are co-authors of the award-winning book "Fabricated: The New World of 3D Printing" (Wiley).

Lipson is a professor of engineering at Columbia University in New York City. He has co-authored more than 200 papers and speaks frequently at high-profile venues such as TED and the National Academies. Before joining academia, he served five years as a officer in the Israeli navy.

Kurman is an author and technology analyst. She is a graduate of Cornell University, the University of Illinois and the U.S. Peace Corps.

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LEADERSHIP:

AMERICA'S MISSING INGREDIENT

THE POTENTIAL

BY THOMAS N. WHEATLEY

hen it comes to forging leaders, America has more than earned its stripes. Dating back to the beginning of our nation. Americans from all walks of life have consistently demonstrated their ability to provide leadership in the midst of national hardship. Brought into an unforgiving world, hardened by the realities of a young democracy and emboldened by boundless possibility, it was America where the strongest of humanity stood tall in the face of adversity and assumed the helm of liberty with fierce determination. As a result, Americans despite each possessing unique views about the world - shared a unity of purpose. Even in the presence of sharp political fray, those who served at the pleasure of the people embraced their roles as leaders of a free society, and pursued with determination avenues they believed would create a better United States.

Such skillful leadership is a far cry from the leadership deficit we face today.

There has been, quite undeniably, a declivity in U.S. leadership. Any long-serving public official will note a disheartening polarity that did not characterize past generations of public servants. Such division among a nation and its people – a telltale sign of a leadership shortage – is increasingly the norm rather than the exception.

Despite this shortfall, I believe we are still a nation where unparalleled leadership can thrive. While our leadership deficit is indeed concerning, it takes only a persistent application of basic leadership principles to change trajectory. Indeed, the greatest of U.S. leadership is still on the horizon – but we have to choose it.

My co-author, Gen. Tommy Franks, speaks of what he calls the Four Stars of Leadership: character, communication, common vision and caring. These central principles of leadership offer a roadmap to success for aspiring leaders. Moreover, his principles of leadership are why I remain hopeful, because even in these trying

times I continue to find myself in the company of those who follow them.

In my fellow law students, I observe an unyielding resolve and passion to unearth just solutions to our country's most pressing concerns. In my brothers and sisters in arms, I see the perseverance, courage and empathy that empowers them to confront, expose and ultimately defeat the darkest parts of humankind. In my family, friends and neighbors, I see the compassion and resilience that enables a community to heal after tragedy.

In the midst of fear and uncertainty, I see people who uphold integrity and embody the virtues of altruistic service. They are people with a brighter vision of the future and the passion to make that vision a reality, and it is these people whom I call to national leadership.

Throughout my life I have had the opportunity to see fellow Americans, each with his or her own unique story and background, selflessly agree to shoulder the mantle of leadership and bravely cast aside the ease and comfort of apathetic indifference in exchange for a life of service and sacrifice.

We are a population brimming with leadership potential. And right now, we desperately need to unlock that potential. The time has come for an American leader who upholds the values vital to successful leadership: an undying veneration for honor and integrity, a burning instinct to protect the principles of freedom, a firm derision for selfish personal gain and a persistent resolve to overcome the challenges of our time.

The American people crave these attributes in their leaders – the basic tenets of leadership that can breathe life back into American unity and optimism.

Thomas N. Wheatley is a second lieutenant in the U.S. Army and a law student at George Mason University. As a writer and speaker, he is best known for his essay "Liberty Will Survive: Why You Should Be Proud to Be an American."



THE PRIVILEGE BY TOMMY FRANKS

have been remarkably blessed in my life. I have been able to serve the country I love and fortunate to work with the most humble and noble of professionals. Seeing every day how they labored to ensure the safety of America deepened my own love and commitment to my country.

For these extraordinary opportunities I am profoundly grateful to the American people. My respect for those who serve compels me to be a voice among the growing chorus calling for change.

We need a leader.

One of the most memorable aspects of my career was the selfless leadership I witnessed every day. Extending back to my days as a young junior enlisted soldier, I was always filled with pride witnessing the fierce commitment to mission and concern for fellow soldiers demonstrated by leaders hailing from all parts of the United States. These men and women – these warriors, these leaders, these Americans – lived by a code of honor never to be stained by a desire for personal or material gain. Their focus was on how to be the best leader they could be. When circumstances called for sacrifice, they sacrificed. When tragedy arose, they gave their soldiers the strength to move forward. As all who have served know, the relationship between soldiers and their leaders is premised on a strong foundation of trust - a trust so profound that even the possibility of death cannot sever it.

It is through this relationship that I came to understand the Four Stars of Leadership: character, communication, common vision and caring.

- Character is the totality of qualities distinctive to an individual employed to carry out his or her values, ethics and morals.
- Communication in leadership is any act by which information is exchanged between people to focus them on the objective.
- Vision is the ability to see beyond the present reality to where you want to end up and how to get there. When a team of people rally around a common vision, it can be a powerful movement.

■ Finally, great leaders are those who can truly care; they are willing to act on behalf of, and in the best interests of another person, group, team, government or cause.

Currently, many at the highest levels of our government have forgotten these basic tenets of leadership, as well as the enormous privilege entrusted to them by the American people. With these core principles of leadership lacking, it is no coincidence that America is in the midst of a leadership crisis.

Americans do not believe their government is willing and/or able to address the policy matters of our time, and such distrust has been consistently validated through a string of leadership failures.

We live in a world that is ever-changing. Information and ideas have never been exchanged at such a rapid rate. The threats we face are dynamic and encompass all aspects of life, and the challenges for the next generation of Americans are formidable. The United States must be ready to meet these challenges head-on, and strong leadership is crucial to providing the unity of purpose, guidance and direction necessary to tackle such challenges.

The consequences of poor leadership are devastating. We stand at the precipice, and the time is upon us to find the kind of strong leadership I witnessed over the course of my military career.

I proudly support and join my young co-author's call for renewed and enlightened national leadership. Our leaders must recognize the privilege of service and serve the American people accordingly.

Retired Gen. Tommy Franks was commander in chief of U.S. Central Command from 2000 to 2003, leading U.S. and coalition forces during Operation Enduring Freedom in Afghanistan and Operation Iraqi Freedom in Iraq. Since retiring in 2003, Franks has traveled the world, speaking on leadership, character and the value of democracy.



'Why Memorial Day'

Before his 30-year tenure as a U.S Supreme Court justice, for which he is often remembered as the



"Great Dissenter," Oliver Wendell Holmes Jr. fought in the Civil War on the side of the Union. A first lieutenant in the 20th Massachusetts Regiment of Volunteers, he was seriously wounded at the battles of Ball's Bluff, Antietam and Chancellorsville.

On May 30, 1884, Holmes gave the following address to his fellow veterans at John

Sedgwick Post No. 4, Grand Army of the Republic, in Keene, N.H. It is the first of his two famous and oft-quoted Memorial Day speeches.

ot long ago I heard a young man ask why people still kept up Memorial Day, and it set me thinking of the answer. Not the answer that you and I should give to each other – not the expression of those feelings that, so long as you live, will make this day sacred to memories of love and grief and heroic youth – but an answer which should command the assent of those who do not share our memories, and in which we of the North and our brethren of the South could join in perfect accord.

So far as this last is concerned, to be sure, there is no trouble. The soldiers who were doing their best to kill one another felt less of personal hostility, I am very certain, than some who were not imperilled by their mutual endeavors. I have heard more than one of those who had been gallant and distinguished officers on the Confederate side say that they had had no such feeling. I know that I and those whom I knew best had not. We believed that it was most desirable that the North should win; we

Rick Reaves' painting "The Old Flag Never Touched the Ground" depicts the all-black 54th Massachusetts Volunteer Infantry Regiment, which led an attack on Fort Wagner near Charleston, S.C., on July 18, 1863. Atop the rampart, Sgt. William Carney planted the flag and fought off numerous attempts by the Confederates to capture it. Faced with superior numbers and firepower, the 54th eventually had to pull back. When praised for his bravery, Carney replied, "I only did my duty; the old flag never touched the ground." He later received the Medal of Honor for his actions.

Courtesy National Guard Bureau

believed in the principle that the Union is indissoluble; we, or many of us at least, also believed that the conflict was inevitable, and that slavery had lasted long enough. But we equally believed that those who stood against us held just as sacred convictions that were the opposite of ours, and we respected them as every man with a heart must respect those who give all for their belief. The experience of battle soon taught its lesson even to those who came into the field more bitterly disposed. You could not stand up day after day in those indecisive contests where overwhelming victory was impossible because neither side would run as they ought when beaten, without getting at least something of the same brotherhood for the enemy that the north pole of a magnet has for the south – each working in an opposite sense to the other, but each unable to get along without the other. As it was then, it is now. The soldiers of the war need no explanations; they can join in commemorating a soldier's death with feelings not different in kind, whether he fell toward them or by their side.

But Memorial Day may and ought to have a meaning also for those who do not share our memories. When men have instinctively agreed to celebrate an anniversary, it will be found that there is some thought of feeling behind it which is too large to be dependent upon associations alone. The Fourth of July, for instance, has still its serious aspect, although we no longer should think of rejoicing like children that we have escaped from an outgrown control, although we have achieved not only our national but our moral independence and know it far too profoundly to make a talk about it, and although an Englishman can join in the celebration without a scruple. For, stripped of the temporary associations which gave rise to it, it is now the moment when by common consent we pause to become conscious of our national life and to rejoice in it, to recall what our country has done

for each of us, and to ask ourselves what we can do for the country in return.

So to the indifferent inquirer who asks why Memorial Day is still kept up we may answer, it celebrates and solemnly reaffirms from year to year a national act of enthusiasm and faith. It embodies in the most impressive form our belief that to act with enthusiam and faith is the condition of acting greatly. To fight out a war, you must believe something and want something with all your might. So must you do to carry anything else to an end worth reaching. More than that, you must be willing to commit yourself to a course, perhaps a long and hard one, without being able to foresee exactly where you will come out. All that is required of you is that you should go somewhither as hard as ever you can. The rest belongs to fate. One may fall at the beginning of the charge or at the top of the earthworks; but in no other way can he reach the rewards of victory.

When it was felt so deeply as it was on both sides that a man ought to take part in the war unless some conscientious scruple or strong practical reason made it impossible, was that feeling simply the requirement of a local majority that their neighbors should agree with them? I think not: I think the feeling was right – in the South as in the North. I think that, as life is action and passion, it is required of a man that he should share the passion and action of his time at peril of being judged not to have lived.

If this be so, the use of this day is obvious. It is true that I cannot argue a man into a desire. If he says to me, "Why should I seek to know the secrets of philosophy? Why seek to decipher the hidden laws of creation that are graven upon the tablets of the rocks, or to unravel the history of civilization that is woven in the tissue of our jurisprudence, or to do any great work, either of speculation or of practical affairs?", I cannot answer him; or at least my answer is as little worth making for any effect it will have upon his wishes if he asked why I should eat this, or drink that. You must begin by wanting to. But although desire cannot be imparted by argument, it can be by contagion. Feeling begets feeling, and great feeling begets great feeling. We can hardly share the emotions that make this day to us the most sacred day of the year, and embody them in ceremonial pomp, without in some degree imparting them to those who come after us. I believe from the bottom of my heart that our memorial halls and statues and tablets, the tattered flags of our regiments gathered in the Statehouses, are worth more to our young men by way of

chastening and inspiration than the monuments of another hundred years of peaceful life could be.

But even if I am wrong, even if those who come after us are

to forget all that we hold dear, and the future is to teach and kindle its children in ways as yet unrevealed, it is enough for us that this day is dear and sacred.

Accidents may call up the events of the war. You see a battery of guns go by at a trot, and for a moment you are back at White Oak Swamp, or Antietam, or on the Jerusalem Road. You hear a few shots fired in the distance, and for an instant vour heart stops as you say to yourself, "The skirmishers are at it," and listen for the long roll of fire from the main line. You meet an old comrade after many years of absence; he recalls the moment that you were nearly surrounded by the enemy, and again there comes up to you that swift and cunning thinking on which once hung life and freedom -"Shall I stand the best chance if I try the pistol or the saber on that man who means to stop me? Will he get his carbine free before I reach him, or can I kill him first?" These and the thousand other events we have known are called up, I say, by accident, and, apart from accident, they lie forgotten.

But as surely as this day comes round we are in the presence of the dead. For one hour, twice a year at least – at the regimental dinner, where the ghosts sit at table more numerous than the living, and on this day when we decorate their graves – the dead come back and live with us.

I see them now, more than I can number, as once I saw them on this earth. They are the same bright figures, or their counterparts, that come also before your eyes; and when I speak of those who were my brothers, the same words describe yours.

I see a fair-haired lad, a lieutenant, and a captain on whom life had begun somewhat to tell, but still young, sitting by the long mess-table in camp before the regiment left the State, and wondering how many of those who gathered in our tent could hope to see the end of what was then beginning. For neither of them was that destiny reserved. I remember, as I awoke from my first long stupor in the hospital after the battle of Ball's Bluff, I heard the doctor say, "He was a beautiful boy," and I knew that one of those two speakers was no more. The other, after passing through all the previous battles, went into Fredericksburg with a strange

But as surely as this day comes round we are in the presence of the dead.

premonition of the end, and there met his fate.

I see another youthful lieutenant as I saw him in the Seven Days, when I looked down the line at Glendale. The officers were at the head of their

companies. The advance was beginning. We caught each other's eye and saluted. When next I looked, he was gone.

I see the brother of the last – the flame of genius and daring on his face – as he rode before us into the wood of Antietam, out of which came only dead and deadly wounded men. So, a little later, he rode to his death at the head of his cavalry in the Valley.

In the portraits of some of those who fell in the civil wars of England, van Dyck has fixed on canvas the type who stand before my memory. Young and gracious faces, somewhat remote and proud, but with a melancholy and sweet kindness. There is upon their faces the shadow of approaching fate, and the glory of generous acceptance of it. I may say of them, as I once heard it said of two Frenchmen, relics of the *ancien régime*, "They were very gentle. They cared nothing for their lives." High breeding, romantic chivalry – we who have seen these men can never believe that the power of money or the enervation of pleasure has put an end to them. We know that life may still be lifted into poetry and lit with spiritual charm.

But the men, not less, perhaps even more, characteristic of New England, were the Puritans of our day. For the Puritan still lives in New England – thank God – and will live there so long as New England lives and keeps her old renown. New England is not dead yet. She still is mother of a race of conquerors – stern men, little given to the expression of their feelings, sometimes careless of their graces, but fertile, tenacious, and knowing only duty. Each of you, as I do, thinks of a hundred such that he has known. I see one grandson of a hard rider of the Revolution and bearer of his historic name – who was with us at Fair Oaks, and afterwards for five days and nights in front of the enemy the only sleep that he would take was what he could snatch sitting erect in his uniform and resting his back against a hut. He fell at Gettysburg. His brother, a surgeon, who rode, as our surgeons so often did, wherever the troops would go, I saw kneeling in ministration to a wounded man just in rear of our line at Antietam. his horse's bridle round his arm – the next moment his ministrations were ended. His senior associate



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survived all the wounds and perils of the war, but, not yet through with duty as he understood it, fell in helping the helpless poor who were dying of cholera in a Western city.

I see another quiet figure, of virtuous life and quiet ways, not much heard of until

our left was turned at Petersburg. He was in command of the regiment as he saw our comrades driven in. He threw back our left wing, and the advancing tide of defeat was shattered against his iron wall. He saved an army corps from disaster, and then a round shot ended all for him.

There is one who on this day is always present on my mind. He entered the army at nineteen, a second lieutenant. In the Wilderness, already at the head of his regiment, he fell, using the moment that was left him of life to give all of his little fortune to his soldiers. I saw him in camp, on the march, in action. I crossed debatable land with him when we were rejoining the Army together. I observed him in every kind of duty, and never in all the time I knew him did I see him fail to choose that alternative of conduct which was most disagreeable to himself. He was indeed a Puritan in all his virtues, without the Puritan austerity; for, when duty was at an end, he who had been the master and leader became the chosen companion in every pleasure that a man might honestly enjoy. His few surviving companions will never forget the awful spectacle of his advance alone with his company in the streets of Fredericksburg. In less than sixty seconds he would become the focus of a hidden and annihilating fire from a semicircle of houses. His first platoon had vanished under it in an instant, ten men falling dead by his side. He had quietly turned back to where the other half of his company was waiting, had given the order, "Second Platoon, forward!" and was again moving on, in obedience to superior command, to certain and useless death, when the order he was obeying was countermanded. The end was distant only a few seconds; but if you had seen him with his indifferent carriage, and sword swinging from his finger like a cane, you would never have suspected that he was doing more than conducting a company drill on the camp parade ground. He was little more than a boy, but the grizzled corps

Unmarshalled save by their own deeds, the army of the dead sweep before us, "wearing their wounds like stars."

commanders knew and admired him; and for us, who not only admired, but loved, his death seemed to end a portion of our life also.

There is one grave and commanding presence that you all would recognize, for his life has become a part of our common

history. Who does not remember the leader of the assault of the mine at Petersburg? The solitary horseman in front of Port Hudson, whom a foeman worthy of him bade his soldiers spare, from love and admiration of such gallant bearing? Who does not still hear the echo of those eloquent lips after the war, teaching reconciliation and peace? I may not do more than allude to his death, fit ending of his life. All that the world has a right to know has been told by a beloved friend in a book wherein friendship has found no need to exaggerate facts that speak for themselves. I knew him, and I may even say I knew him well; yet, until that book appeared, I had not known the governing motive of his soul. I had admired him as a hero. When I read, I learned to revere him as a saint. His strength was not in honor alone, but in religion; and those who do not share his creed must see that it was on the wings of religious faith that he mounted above even valiant deeds into an empyrean of ideal life.

I have spoken of some of the men who were near to me among others very near and dear, not because their lives have become historic, but because their lives are the type of what every soldier has known and seen in his own company. In the great democracy of self-devotion, private and general stand side by side. Unmarshalled save by their own deeds, the army of the dead sweep before us, "wearing their wounds like stars." It is not because the men I have mentioned were my friends that I have spoken of them, but, I repeat, because they are types. I speak of those whom I have seen. But you all have known such; you, too, remember!

It is not of the dead alone that we think on this day. There are those still living whose sex forbade them to offer their lives, but who gave instead their happiness. Which of us has not been lifted above himself by the sight of one of those lovely, lonely women, around whom the wand of sorrow has

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traced its excluding circle – set apart, even when surrounded by loving friends who would fain bring back joy to their lives? I think of one whom the poor of a great city know as their benefactress and friend. I think

... our hearts were touched with fire. It was given to us to learn at the outset that life is a profound and passionate thing.

of one who has lived not less greatly in the midst of her children, to whom she has taught such lessons as may not be heard elsewhere from mortal lips. The story of these and her sisters we must pass in reverent silence. All that may be said has been said by one of their own sex –

But when the days of golden dreams had perished, And even despair was powerless to destroy, Then did I learn how existence could be cherished, Strengthened, and fed without the aid of joy. Then did I check the tears of useless passion, weaned my young soul from yearning after thine Sternly denied its burning wish to hasten Down to that tomb already more than mine.

Comrades, some of the associations of this day are not only triumphant, but joyful. Not all of those with whom we once stood shoulder to shoulder – not all of those whom we once loved and revered – are gone. On this day, we still meet our companions in the freezing winter bivouacs and in those dreadful summer marches where every faculty of the soul seemed to depart one after another, leaving only a dumb animal power to set the teeth and to persist – a blind belief that somewhere and at last there was bread and water. On this day, at least, we still meet and rejoice in the closest tie which is possible between men – a tie which suffering has made indissoluble for better, for worse.

When we meet thus, when we do honor to the dead in terms that must sometimes embrace the living, we do not deceive ourselves. We attribute no special merit to a man for having served when all were serving. We know that, if the armies of our war did anything worth remembering, the credit belongs not mainly to the individuals who did it, but to average human nature. We also know very well that we cannot live in associations with the past alone, and we admit that, if we would be worthy of the past, we

must find new fields for action or thought, and make for ourselves new careers.

But, nevertheless, the generation that carried on the war has been set apart by its experience. Through our great good fortune, in our

youth our hearts were touched with fire. It was given to us to learn at the outset that life is a profound and passionate thing. While we are permitted to scorn nothing but indifference, and do not pretend to undervalue the worldly rewards of ambition, we have seen with our own eyes, beyond and above the gold fields, the snowy heights of honor, and it is for us to bear the report to those who come after us. But, above all, we have learned that whether a man accepts from Fortune her spade, and will look downward and dig, or from Aspiration her axe and cord, and will scale the ice, the one and only success which it is his to command is to bring to his work a mighty heart.

Such hearts - ah me, how many! - were stilled twenty years ago; and to us who remain behind is left this day of memories. Every year – in the full tide of spring, at the height of the symphony of flowers and love and life - there comes a pause, and through the silence we hear the lonely pipe of death. Year after year, lovers, wandering under the apple trees and through the clover and deep grass, are surprised with sudden tears as they see black veiled figures stealing through the morning to a soldier's grave. Year after year, the comrades of the dead follow, with public honor, procession and commemorative flags and funeral march honor and grief from us who stand almost alone, and have seen the best and noblest of our generation pass away.

But grief is not the end of all. I seem to hear the funeral march become a paean. I see beyond the forest the moving banners of a hidden column. Our dead brothers still live for us, and bid us think of life, not death – of life to which in their youth they lent the passion and joy of the spring. As I listen, the great chorus of life and joy begins again, and amid the awful orchestra of seen and unseen powers and destinies of good and evil, our trumpets sound once more a note of daring, hope, and will.

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Commander to Congress: 'VETERANS NEED VA'

Testifying before the House and Senate Veterans' Affairs committees Feb. 25 – and surrounded by more than 300 veterans and their families – American Legion National Commander Mike Helm laid out the organization's legislative agenda, which focuses on the need for improved transition assistance for veterans of all ages.

Helm called for action to expand VA-recognized treatments for post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI). "For tens of thousands, VA's current prescription is not working," he said. "This breakdown contributes mightily to the high rates of veteran suicide, substance abuse and homelessness that our nation – and The American Legion – cannot abide."

Helm urged Congress to study alternative PTSD/TBI treatments and called on VA to accept them. "Introduce and pass legislation that will require VA to recognize treatments other than those that are measured in milligrams and doses per day," he said.

He also addressed emergency legislation to allow VA patients to use non-VA providers if patients were waiting a month or longer to see doctors, or if they lived far from VA facilities. "But let me be clear," he added. "The American Legion supports Choice Cards only as a temporary fix to the bigger problem of VA access. We adamantly oppose privatization or the vouchering out of VA care as a long-term solution. Veterans need VA. It's up to us to repair the access problem and restore trust, not send veterans down the road for help somewhere else."

Helm also issued a reminder that U.S. troops remain in harm's way around the world. "Sadly, some will come home having made the ultimate sacrifice," he said. "They will arrive at Dover Air Force Base in coffins draped by our nation's enduring symbol of freedom. I ask once more for Congress to support the majority of Americans in co-sponsoring and passing a bill introduced in the House last month that would amend the U.S. Constitution to protect our flag from desecration."

Read Helm's full written testimony online:

www.legion.org/publications





FORMER CONGRESSMAN FROM MAINE HONORED

Mike Michaud, former U.S. representative from Maine, received The American Legion's Distinguished Public Service Award for his

service to the nation's veterans, especially during last year's VA scandals.

Michaud served in Congress from 2003 to 2015 and was ranking member of the House Committee on Veterans' Affairs when the scandals broke.

"My first time I was elected to Congress, I was naïve," he said. "What I learned is that veterans were not taken care of. When it came time to put up the money to actually take care of the veterans and their families, that's where Congress and the administrations have fallen far short."



hoto by Lucas Carter

DINNER WITH WALTER REED PATIENTS

The American Legion's Operation Comfort Warriors and the Aleethia Foundation hosted a dinner for approximately 80 Walter Reed National Military Medical Center patients, their families and other guests at the National Press Club. The foundation hosts weekly dinners for patients.



TAILORED TREATMENT FOR TBI/PTSD

Dr. Ronald Poropatich, director of the Center for Military Medicine Research at the University of Pittsburgh, told members of the Legion's TBI/PTSD Committee that

treatments for the conditions need to be more individualized and tailored to the specific symptoms of each patient.

ACCESS TO INSTALLATIONS Army officials told the Veterans Employment & Education Division of their hope that the Legion and other VSOs will take advantage of their newly expanded access to military installations to better assist transitioning servicemembers.



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You took an active role ... educating members of Congress, other federal agencies and the public about the extent of VA's problems. Your efforts helped pave the way for

some of the most significant changes to the Department of Veterans Affairs in history.

Rep. Jeff Miller, R-Fla., chairman of the House Veterans' Affairs Committee, speaking at the Commander's Call about The American Legion's work over the past year to improve service and restore trust in VA

(Looking for a job) online, it's just a computer screen ... Talking to someone, you're feeling more confident about yourself.

Army Command Assistant Spc. Stacy Mulvaney,who attended the Legion's Employment &
Empowerment Summit and Hiring Our Heroes job fair



The measures being made right now by (VA Secretary) Bob McDonald are very welcome ... (but) are only the beginning. I hope they will be followed by even more

significant steps, so that VA regains trust and credibility. It's lost a lot.

Sen. Richard Blumenthal, D-Conn., ranking member of the Senate Veterans' Affairs Committee, speaking at the Commander's Call



When servicemembers join the military, they are signing a blank check. We are underwriting that check.

Army Maj. Gen. Richard Thomas, chief medical

officer and director of the Defense Health Agency Healthcare Operations Directorate, addressing the National Security Commission on the future of military medicine



Sgt. 1st Class Ralph Perpignan chats with Tania Allen, veteran employment program manager at the Environmental Protection Agency, during the Legion's Employment & Empowerment Summit. PhotobyLucas Carter

MAKING THE TRANSITION Summit, workshop and job fair address needs

Transition assistance for those leaving or soon to leave active-duty military service was high on the agenda for the Legion's Employment & Empowerment Summit, which helped kick off the Washington Conference.

On Feb. 19, a corporate panel that answered questions about the hiring of veterans in the private sector included representatives from IBM, Humana, Lockheed Martin, Boeing and CitiGroup, among others. Representatives discussed their companies' experiences and initiatives for hiring veterans, and gave attendees advice about how to connect military experience and a civilian company's needs. When a veteran seeks employment in the private sector, "the key thing is making sure you tailor your résumé to match 100 percent of those qualifications," said David Wallace of Lockheed Martin. "If you don't have that, you're not moving forward."

The next day, a résumé workshop featured Sin Kook, a career coach with Easter Seals' Veteran Staffing Network who provided advice on constructing a résumé and making a good impression in job interviews.

Both events culminated in the Hiring Our Heroes job fair at the Washington Hilton on Feb. 20. Legionnaire Bob Looby, who has been instrumental in conducting several successful hiring fairs in New Jersey, was on hand to help register attendees. "It's so critical because the majority of our younger vets went into the service right from high school," he said. "They have no training with résumé writing (or) interview skills. It's very important to get them back in the real world."

In two panel discussions, the summit addressed the specific needs of women veterans making the transition.

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FOREIGN AFFAIRS

China's territorial expansion

China is in the midst of what *The Wall Street Journal* calls "a dramatic expansion" of construction of artificial islands on and around the disputed reefs sprinkled across the South China Sea. Satellite imagery indicates that China has built an artificial island covering 75,000 square yards around Hughes Reef. The island includes two piers, a cement plant and a helicopter pad. It lies 210 miles from the Philippines.

According to a *Los Angeles Times* report, "Dredging around Fiery Cross Reef, a former outcropping in the Spratly Islands, over the last year has created a new island nearly two miles long." Beijing is building similar man-made islands on and around Johnson South Reef and Gaven Reefs, which also lie in disputed waters.

The man-made islands, complete with air strips and support infrastructure, have obvious military applications. According to the congressionally authorized U.S.-China Economic and Security Review Commission, "China appears to be expanding and upgrading military and civilian infrastructure – including radars, satellite communication equipment, anti-aircraft and naval guns, helipads and docks – on some of the man-made islands."

Beijing will likely use the islands to "enforce China's territorial and jurisdictional claims, and bring pressure to bear on warships and coast guard vessels from the other claimants," says Ian Storey of the Institute of Southeast Asian Studies in Singapore.

FOREIGN AFFAIRS

The Great Wall of Saudi Arabia

Saudi Arabia is building a massive 600-mile wall, ditch and berm barrier along its border with Iraq in hopes of protecting the oil-rich kingdom from the Islamic State, the London *Telegraph* reports.

The wall will include 40 watchtowers, 38 communications towers and 32 military posts, as well as an unspecified number of night-vision cameras, helipads and military vehicles. Riyadh has deployed an estimated 30,000 troops to the Iraq border area.



ENVIRONMENT

The People's Republic of Smog

A study conducted by Peking University and Greenpeace concludes that 250,000 people living in China's largest cities could die prematurely due to China's terrible air quality, *The Wall Street Journal* reports. Even the mayor of Beijing has called China's capital city "unlivable" due to smog and pollution. The Chinese government, which declared "war" on pollution in 2014, wants a 25 percent reduction in air pollutants by 2017.

VERBATIM

In the distant future, they may outlaw (human) driven cars because they're too dangerous.

Tesla founder Elon Musk, speaking at Nvidia's GPU Technology Conference in San Jose, Calif. He said that advances in sensor and software technology will eventually make cars' onboard computers better at driving than humans wielding "two-ton death machines." Wikimedia Commons



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NATIONAL CONVENTION

A distinguished collection



An Army veteran and New York Legionnaire has an unrivaled collection of American Legion national convention medals.

Steve Leader, who attends graduate school in San Diego using the Post-9/11 GI Bill, is a member of Post 873 in Newfane, N.Y., where his father, Paul, is post commander. Since 2005, he has collected official

medals and other memorabilia from every national convention, from 1919 to 2014. Leader started the project with his father on his mind, as "something I could do to learn about him and the Legion."

Leader collects official convention medals, pins, badges and other decorations that belonged to delegates and distinguished guests, as well as Auxiliary and Sons items. He finds them at garage sales, flea markets and eBay, and trades with other collectors. More difficult to find are wartime medals made of papier-mâché, few of which have survived the decades. Multiples of an item aren't a problem, Leader says; someone else is bound to want the extras in return for something he doesn't have. His goal is to upgrade them all to the Distinguished Guest level.

Some of Leader's collection has quite a pedigree, including items from the estate of American Legion awardee Bowie Kuhn, a former Major League Baseball commissioner. He also has Distinguished Guest medals and other items from Past National Commander Michael Kogutek, a New York native who died in 2012 – though not his personal medal from 1981, the convention over which Kogutek presided as national commander.

Although Leader has personally attended just one national convention (meeting his father in Reno in 2007 as a Sons member), he enjoys researching them, especially the participants; to him, it's about "the history behind the convention ... the people who went there, trying to help veterans." He won't consider his collection complete until he has a Distinguished Guest item from every convention – and even then, there's his ongoing state collection (for which he's trying to document all the convention medals from every state since 1919), gold collection (10k and 14k pins and medals) and more.

Leader says he's thinking about trying to display his collection at a national convention, perhaps closer to the Legion's centennial celebration starting in 2018; until then, his national convention medals collection is available for viewing online.

steveleader.com/american_legion/national_
convention.html

LEGION BASEBALL

ESPN to televise more of Legion World Series

ESPN will broadcast the American Legion World Series' two semifinal games, Aug. 17, on its ESPNU channel in addition to the championship game Aug. 18.

The four days of "pool play" leading up to the semifinals will continue to be aired by ESPN through its webcasting service, ESPN3.

The two semifinal games will be shown on ESPNU at 4 p.m. and 7 p.m. EDT Aug. 17, and the championship will air at 7 p.m. Aug. 18 on the same channel.

iir at 7 p.m. Aug. 18 on the same ch

FOREIGN AFFAIRS

NATO gets serious

Responding to Russian efforts to destabilize Eastern Europe and reclaim territories freed at the end of the Cold War, NATO is establishing a chain of command centers on its eastern flank.

As *The Wall Street Journal* reports, Poland, Romania, Bulgaria, Latvia, Lithuania and Estonia will host the new outposts, which are intended to "provide a link between NATO and the armed forces of the six countries where they will be located," according to the *Journal*. The command centers, staffed by 50 personnel each, will also coordinate NATO's expanded military drills in Eastern Europe.

Along with NATO's new rapid-response force, the command posts are considered "the biggest reinforcement of our collective defense since the end of the Cold War," NATO Secretary-General Jens Stoltenberg said in unveiling the plan.

VERBATIM

Every doctor that sees me says they'll kill you, but they die, and I don't. So there must be a mistake somewhere.

Elizabeth Sullivan, 104, of Fort Worth, Texas, who started drinking Dr Pepper in the 1960s – three a day. For her birthday, she received a gift basket from Larry Young, CEO of Dr Pepper Snapple Group.

Source: CBS DFW

iStock



Attention Veterans

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CENTENNIAL

NAMED FOR THE AMERICAN LEGION

Centennial committee looking for highways, bridges, forests and more that honor the nation's largest veterans service organization.

U.S. Route 281 is 1,872 miles long, bisecting the nation from Canada to Mexico and passing through six states. Among three-digit U.S. highways, it is the longest. It is also known as The American Legion Memorial Highway.

The American Legion State Forest in Connecticut offers hiking and canoeing opportunities along the scenic Farmington River. The American Legion Memorial Bridge, meanwhile, is an important Beltway commuter artery that crosses the Potomac River between Maryland and Virginia. USS Tampa Post 5 in Florida takes pride in honoring fallen veterans in American Legion Cemetery. And of course, there's the American Legion Burger Stand in Lake Mills, Wis.

How many of the nation's parks, playgrounds, theaters, hospitals, streets, ferry boats, highways and byways are named after the Legion?

That's what The American Legion 100th Anniversary Observance Committee would like to find out. The committee is compiling a list of Legion-named landmarks and points of interest for a guide to be printed, posted online and made into a smartphone app.



The American Legion Memorial Bridge in Traverse City, Mich., opened in 1930. Wikimedia Commons

If you know of such a landmark, building, forest, stream, mountain or any other point of interest – not including post homes – email American Legion writer/blogger Mark Seavey at mseavey@legion.org. Keep messages brief, stating what it is, its location, whether or not it still exists, and a sentence or two about why it was so named. If sending a photo, keep the resolution low or simply send a link.

Those who would like to submit notices of Legion landmarks by mail can send them to The American Legion Magazine, Attn: Mark Seavey, P.O. Box 1055, Indianapolis, IN 46206.



MEMBERSHIP

NEW POSTS

Arrowhead Post 144, Glendale, Ariz. Chartered Jan. 30 (15 members)

Post 65, Wilsonville, Ore. Chartered Feb. 9 (19 members)

Post 533, Hartford, Mich. Chartered Feb. 17 (19 members)

Western White House Post 271, San Clemente, Calif. Chartered Feb. 24 (15 members)

Post 95, Jasper County, S.C. Chartered Feb. 24 (17 members)

Lake Pleasant Parkway Post 145, Peoria, Ariz.

Chartered March 2 (15 members)

Eric E. Seltenright Post 1948, Colorado Springs, Colo. Chartered March 11 (18 members)

Avon Park Correctional Institute Post 407, Avon Park, Fla. Chartered March 11 (16 members)

Post 390, Branchville, Ind. Chartered March 11 (15 members)

Post 288, Smyrna, Tenn. Chartered March 11 (15 members)

Concordia University Post 1881, Mequon, Wis. Chartered March 11 (22 members)

How a Chicago Doctor **Shook Up** the Hearing Aid Industry with his **Newest** Invention

New nearly invisible digital hearing aid breaks price barrier in affordability

Reported by J. Page

Chicago: Board-certified physician
Dr. S. Cherukuri has done it once again with his
newest invention of a medical grade ALL DIGITAL
affordable hearing aid.

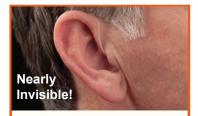
This new digital hearing aid is packed with all the features of \$3,000 competitors at a mere fraction of the cost. Now, most people with hearing loss are able to enjoy crystal - clear, natural sound—in a crowd, on the phone, in the wind—without suffering through "whistling" and annoying background noise.

New Digital Hearing Aid Outperforms Expensive Competitors

This sleek, lightweight, fully programmed hearing aid is the outgrowth of the digital revolution that is changing our world. While demand for "all things digital" caused most prices to plunge (consider DVD players and computers, which originally sold for thousands of dollars and today can be purchased for less), the cost of a digital medical hearing aid remains out of reach.

Dr. Cherukuri knew that many of his patients would benefit but couldn't afford the expense of these new digital hearing aids. Generally they are *not* covered by Medicare or most private health insurance.

The doctor evaluated all the high priced digital hearing aids on the market, broke them down to their base components, and then created his own affordable version—called the MDHearingAid® AIR for its virtually invisible, lightweight appearance.



SAME FEATURES AS EXPENSIVE HEARING AID COMPETITORS

- Mini Behind-The-Ear hearing aid with thin tubing for a nearly invisible profile
- Advanced Noise Reduction to make speech clearer
- Feedback Cancellation eliminates whistling
- ✓ Wide Dynamic Range Compression makes soft sounds audible and loud sounds comfortable
- Telecoil setting for use with compatible phones, and looped environments like churches
- ✓ 3 Programs and Volume Dial to accommodate most common types of hearing loss even in challenging listening environments

MDHearingAid® >>> AIR

Affordable Digital Technology

Using advanced digital technology, the MDHearingAid®AIR automatically adjusts to your listening environment—prioritizing speech and de-emphasizing background noise. Experience all of the sounds you've been missing at a price you can afford.

The MDHearingAid®AIR is FDA-Registered. This doctor designed and approved hearing aid comes with a full year's supply of long-life batteries. It delivers crisp, clear sound all day long and the soft flexible ear buds are so comfortable you won't realize you're wearing them.

FDA Guidance and Consumer Education

The FDA states that only FDA-Registered hearing aids, such as the **MD**HearingAid *AIR* should be used to help people with hearing loss. Imitation "Personal Sound Amplifiers (PSAPs)" are not a substitute for hearing aids and can, in fact, lead to more damage in your hearing.

Try It Yourself At Home With Our 45-Day Risk-Free Trial

Of course, hearing is believing and we invite you to try it for yourself with our RISK-FREE 45-Day home trial. If you are not completely satisfied, simply return it within that time period for a full refund of your purchase price.

Can a hearing aid delay or prevent dementia?

A study by Johns Hopkins and National Institute on Aging researchers suggests older individuals with hearing loss are significantly more likely to develop dementia over time than those who retain their hearing. They suggest that an intervention—such as a hearing aid—could delay or prevent dementia by improving hearing!

"Satisfied Buyers Agree AIR is the Best Digital Value!"

"I am hearing things I didn't know I was missing. Really amazing. I'm wearing them all the time" —Linda Irving, Indiana

"Almost work too well. I am a teacher and hearing much better now" —Lillian Barden, California

"I have used many expensive hearing aids, some over \$5,000. The AIRs have greatly improved my enjoyment of life"
—Som Y., Michigan

"I would definitely recommend them to my patients with hearing loss" —Amy S., Audiologist, Munster, Indiana



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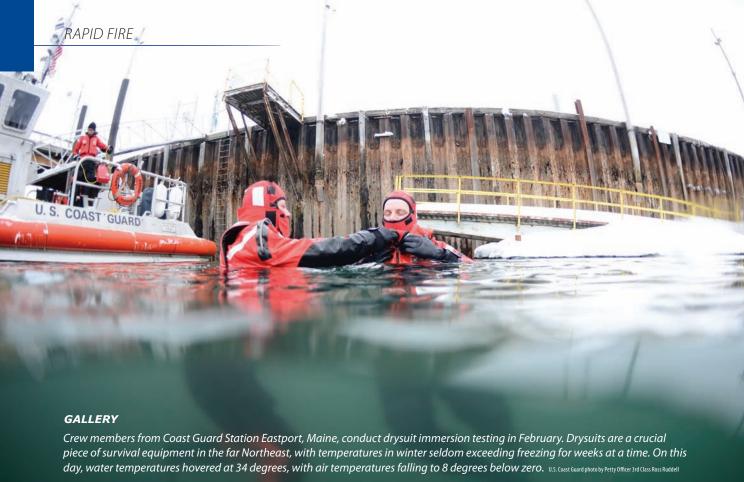
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MEDIA

Yes, that was a Legion tank



The American Legion made the cover of *Sports Illustrated* – specifically, Waunakee, Wis., Post 360 did – when the magazine featured University of Wisconsin star Frank Kaminsky in its March

Madness issue previewing the 2015 NCAA Men's Basketball Tournament.

Seven-foot-tall "Frank the Tank" posed in the snow for photographer Joe Rosenberg, standing in sub-freezing temperatures in front of Post 360's 1978-built M60A3 main battle tank, which last saw duty with the 1st Battalion 632nd Armor, Wisconsin National Guard, and has been displayed at the post since the late 1990s, said Herb Damsteegt, Post 360's commander.

"(Sports Illustrated) went online and asked for tanks in Dane County, Wis.," Damsteegt said, adding that the search produced two hits: McFarland and Waunakee. When the magazine came out, the Milwaukee CBS affiliate interviewed Post 360 leaders about the tank and the shoot.

BY THE NUMBERS

160 Number of attendees at Fletcher-McCollister Post 135's second annual American Legion Birthday Ball in Phenix City, Ala. The event included a local Junior ROTC color guard, a POW/MIA ceremony, singing of the five military anthems, dinner and dancing. Proceeds benefit the post's Boys State program.

Number of congressional hearings the week of March 23 featuring testimony by American Legion staff in Washington. Subjects included the Veterans Choice Card, veteran-owned small businesses, the GI Bill, homeless veterans, and recommendations made by the Military Compensation and Retirement Modernization Commission.

\$39,000 Amount in gear donated by The American Legion's Operation Comfort Warriors (OCW) to Fort Benning's Warrior Transition Battalion, which hosted the Warrior Games Regional Trials Feb. 23-27. OCW provided air rifles, air pistols, 10 sport wheelchairs, compound bows, recurve bows and other archery accessories, giving

80 wounded and ill servicemembers an opportunity to qualify for the Army trials at Fort Bliss in El Paso, Texas, and hopefully national competition this summer in Quantico, Va.





CAREERS

The five D's of résumé development



Want to write a great résumé that gets you noticed, interviewed and hired? Be certain to incorporate these five essential characteristics:

■ **Direction** The most important

thing to know about résumés is to write to the future – to the job that you want. How do you do that? By focusing on the skills, experiences and achievements you have that most align with that objective. A résumé is not an autobiography and you don't need to include every single piece of information. Instead, write one that uses your past experiences to support your future goals.

- Differentiation Why you? Out of all the candidates for a particular job, why are you the one? What makes you unique? You must answer that question in your résumé, or you're just one of many who have the primary skill sets required for that job but have done nothing to make himself or herself distinctive and memorable.
- **Depth** A great way to sell yourself in your résumé is to tell stories about your responsibilities, organizations, challenges and achievements. Rather than writing a long list of duties that are the same for just about anyone in that job, tell the story of each position and of your career to give your résumé depth and dimension.
- Data Share numbers and percentages in the text of your résumé and in tables, charts and graphics. Numbers instantly grab a reader's attention, so showcase those of people, budgets and inventories you managed. Highlight gains in performance, cost reductions and other quantifiable achievements. Tell your "career stories" and back them up with results.
- **Direct** Write tight, lean and clean. In other words, tell the whole story in half the words. Modern résumés are brief (one to two pages). The six-line paragraph is now two lines; the list of six bullets is now three.

Follow these strategies for writing powerful résumés and you will get results.

Wendy Enelow is co-author of "Expert Résumés for Military-to-Civilian Transitions" and "Expert Résumés for Career Changers."



EMPLOYMENT

USPS cuts threaten veterans' jobs, affect customers

The U.S. Postal Service (USPS), with more than 100,000 veterans on the payroll, ranks among the nation's largest employers of veterans, along with Walmart and the Department of Defense.

Veterans, including disabled veterans, account for more than 24 percent of the USPS workforce. Due to the closing of more than 140 mail-processing facilities since 2012, however, they and others who seek future postal-service employment face an uncertain future.

"USPS has always been a viable opportunity for those who have given all, coming back (from military service) to an opportunity to create a good life for their families," said Tony McKinnon Sr., director of industrial relations for the American Postal Workers Union (APWU). "It's essential we band together to make sure these services are here for the American people and for those who were willing to put everything on the line."

In 2006, Congress mandated that USPS pre-fund its retirement program, further straining the budget of an agency that relies on its own revenues rather than taxpayer money. The mandate has also meant jobs shed.

"The postal service is under a lot of stress ... some would even call it an attack," said Mark Dimondstein, president of APWU. "None of it is necessary or justified. We have lost a lot of jobs and a lot of service."

Beginning Jan. 5, USPS announced changes in service standards delaying the delivery of first-class mail, essentially eliminating next-day delivery and pushing the average delivery window from an average of 1.8 days to anywhere from two to three days.

In August, The American Legion passed a resolution at its national convention in Charlotte, N.C., urging Congress to support legislation requiring USPS to preserve current service standards guaranteeing the delivery of first-class mail within one to three days and mail transit times for VA claims documentation and/or medications, as well as to limit closures of mail-processing facilities to protect jobs.

"The American Legion supports future efforts to save veterans jobs and the U.S. Postal Service," said Joseph C. Sharpe, director of the Legion's Veterans Employment & Education Division. "We urge Congress to reinstate the plant-closure moratorium, giving Congress time to implement necessary modern-day postal reforms."

- Andrea Dickerson



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PERSONAL FINANCE



The trade-offs we make



"Why didn't I think of that?"
That was my reaction to a recent conversation I had with a colleague here at USAA. He was talking about the everyday trade-offs we make without a second thought. You know, money spent on one thing that now can't be used for something else.

In the same vein, a buddy told me that his choice to drive a modest car (with a modest payment) freed up a few hundred dollars a month, which helps fund his family's vacation. Pretty slick.

Those exchanges got me thinking about the importance of deploying money according with what's important. Not what's important to me, your parents or your neighbors, but to you. With that value as a guide, would your decisions look different? Let's look at a few examples:

- Car for vacation. Here's the basic math on how this could work. Instead of a luxury SUV with a \$50,000 price tag, you could choose a no-bells-and-whistles version for \$25,000. By my calculations (\$25,000 to \$50,000 at 4 percent for 60 months), that chops your payment down by \$460 a month. Over the course of a year, that's more than \$5,500 available for a family vacation. That's a nice trip.
- **Less car for more house.** Not to pick on cars, but think about

the type of house you could squeeze into your budget with an extra \$460 per month. With a 30-year mortgage at 4 percent, that would buy you about \$115,000 more house. Granted, you may have additional maintenance expenses and other factors, but the basic idea holds: put your money where it really matters. And if you have two cars, the amount goes up even more.

■ Eating in for independence. I can't leave this discussion without bringing up the importance of investing for the future. What if you (or your children) trimmed the money spent on dining out by \$25 weekly and invested the \$100 per month you saved? With a hypothetical 7 percent annual return, you'd have more than \$250,000 in 40 years. Visions of the freedom and flexibility that money could provide might make home cooking (or even frozen pizza) taste a lot better.

So what trade-offs are you making? Are they conscious decisions designed to improve your financial well-being or quality of life? Or are they just byproducts of life's momentum, robbing you of the things you really value? Make thoughtful choices and put your money where it can produce the results you desire.

J.J. Montanaro is a certified financial planner with USAA, The American Legion's preferred provider of financial services. Submit questions for him online.

www.legion.org/usaa/focusonfinances



CENTENNIAL

Post 42, Arlington, S.D.

In 1987, Edgar L. Herrick Post 42 of Arlington, S.D., decided to add color to the local veterans memorial by flying donated casket flags of deceased post members – a tradition that continues to this day. Members' families purchase a pole and help raise the flag; they are flown on Memorial Day, Flag Day, the Fourth of July, Labor Day and Veterans Day.

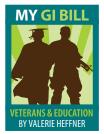
The approximately 150 casket flags now in use are stored in a trailer along with their poles; as new ones are added, many retired flags go on display at the post's hall.

Share your post's legacy

Upload photos, stories and videos of your post's history on the Legion's Centennial Celebration page.

www.legion.org/centennial

EDUCATION



FAFSA and veterans

Q: I am enrolled in college using my GI Bill benefits. I hear that I may still be entitled to financial aid, and I know I must complete the Free Application for Federal Student Aid (FAFSA) to receive any. But it asks for my parents' information. Do I need to fill this out since I served in the military?

A: Section 480(d)(3) of the Higher Education Act indicates that a student is considered to be an independent student if he or she is a veteran of the U.S. Armed Forces, defined in Section 480(c)(1) as any individual who has served on active duty in the Army, Navy, Air Force, Marines or Coast Guard, and released under a condition other than dishonorable.

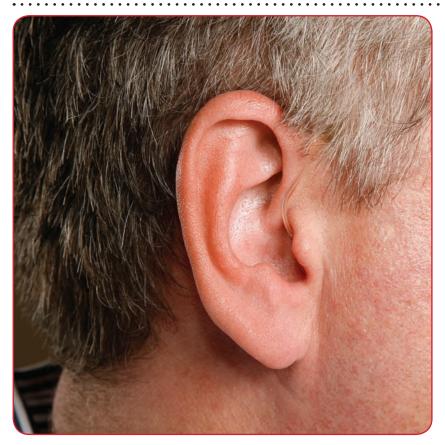
Section 8019 of the Higher Education Reconciliation Act of 2005 changed the definition of "independent student" to include those who served on active duty for other than training purposes, and defined active duty to exclude attendance at a service school.

Independent students do not need to report their parents' financial information on the FAFSA.

Valerie Heffner is a Marine Corps veteran and member of American Legion Post 27 in Arizona. askvalerie@legion.org

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How to submit a reunion

The American Legion Magazine publishes reunion notices for veterans. Send notices to The American Legion Magazine, Attn: Reunions, P.O. Box 1055, Indianapolis, IN 46206, fax (317) 630-1280, e-mail reunions@legion.org or submit information via our website, www.legion.org/reunions.

Include the branch of service and complete name of the group, no abbreviations, with your request. The listing also should include the reunion dates and city, along with a contact name, telephone number and e-mail address. Listings are publicized free of charge.

Your notice will appear on our Web site within a week and will remain available online until the final day of your reunion. Upon submission, please allow three months for your reunion to be published in print. Due to the large number of reunions, The American Legion Magazine will publish a group's listing only once a year.

Notices should be sent at least six months prior to the reunion to ensure timely publication.

Other notices

"In Search Of" is a means of getting in touch with people from your unit to plan a reunion. We do not publish listings that seek people for interviews, research purposes, military photos or help in filing a VA claim. Listings must include the name of the unit from which you seek people, the time period and the location, as well as a contact name, telephone number and e-mail address. Send notices to The American Legion Magazine, Attn: "In Search Of," P.O. Box 1055, Indianapolis, IN 46206, fax (317) 630-1280 or e-mail reunions@legion.org.

The magazine will not publish names of individuals, only the name of the unit. Listings are published free of charge.

Life Membership notices are published for Legionnaires who have been awarded life memberships by their posts. This does not include a member's own Paid-Up-For-Life membership. Notices must be submitted on official forms, which may be obtained by sending a self-addressed stamped envelope to *The American Legion Magazine*, Attn: Life Memberships, P.O. Box 1055, Indianapolis, IN 46206.

"Comrades in Distress" listings must be approved by the Legion's Veterans Affairs & Rehabilitation division. If you are seeking to verify an injury received during service, contact your Legion department service officer for information on how to publish a notice.

To respond to a "Comrades in Distress" listing,

To respond to a "Comrades in Distress" listing, send a letter to *The American Legion Magazine*, Attn: Comrades in Distress, P.O. Box 1055, Indianapolis, IN 46206. Include the listing's CID number in your response

number in your response.
"Taps" notices are published only for Legionnaires who served as department commanders or national officers.

AIR FORCE / ARMY AIR FORCES

3rd Air Rescue Sqdn Det 1 (Korea, 1951-1952), New Orleans, 6/3-5, William "Bill" Price, (205) 339-0960, wpprice@bellsouth.net; 18th FIS, Tucson, AZ, 10/12-16, Lou Klar, (813) 237-4454, bluefox18thfis@verizon.net; 48th Comm Sqdn, Louisville, KY, 5/20-22, Leonard Brookin, (717) 233-2062, lenbrookin70@comcast.net; 49th Ftr Sqdn Assn, Hartford, CT, 9/17-20, Ron Morrissette, (972) 530-4647, ronmorr1@verizon.net; 51st Ftr Interceptor Wing Assn, Omaha, NE, 9/8-13, Eugene & Shirley Zenk, (712) 263-5051, hesszenk@ frontiernet.net; 317th Trp Carrier/Airlift Vets Grp, Savannah, GA, 9/10-13, Jim Timmons, (410) 255-2735, jimt0708@aol.com; 401st, 834th

Supply (England AFB, LA, 1960s), Alexandria, LA, 10/9-11, Sam Searcy, (720) 841-1060, dcmi@ ix.netcom.com; 463rd Airlifters/316th TAW (Langley AFB), Dayton, OH, 9/21-26, Tim Egan, (570) 452-9177, tjegan@aol.com; 464th Bomb Grp (H) 15th AAF (WWII), Dayton, OH, 8/26-30, Tom Will, (330) 518-3612, tewill@gmail.com; 502nd Tact Cntl Grp (Korea) 605th, 606th, 607th & 608th AC&W Sqdns, Dayton, OH, 6/27-7/1, Bill Aylward, (703) 715-0880, waylward1@ verizon.net; 526th FIS/TFS, Omaha, NE, 9/9-13, Donald Wenzlick, (402) 291-0565, dhwenzlick@gmail.com; 601st Tact Cntl Assn, Dayton, OH, 9/7-10, Jim Ernst, (575) 430-3904, jimernst@q.com; 764th AC&W/Radar Sqdn, St. Albans, VT, 8/14-16, John Hauck, (802) 309-9988, hauck@comcast.

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ARMY

2nd Bn 34th Armor Rgt, Branson, MO, 10/1-4, Pat Forster, (949) 493-4080, ltpat234@hotmail. com; **2nd Bn 94th Arty,** Williamsburg, VA, 9/28-











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JOINT

5th Comm Bn (Mar, Navy & Air Force), Lebanon, ME, 9/15-18, Steve Woodman, (207) 658-9848, sfwoodman@myfairpoint.net; Boston CA 69/ CAG 1 & SSN 703, Fayetteville, NC, 7/16-19, Barry Probst, (508) 580-3808, president@ussboston.org; Burton Island Assn, Pigeon Forge, TN, 8/17-21, Robert Sanchez, (505) 550-8495, rjssr52@comcast. net; USN, USMC & USCG Parachute Riggers, Branson, MO, 9/16-18, Howard McMullen, (559) 779-1766, hamcalif@lemoorenet.com

MARINES

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Stable Able Assn, A-1-7 1st Mar Div (Korean War, 1950-1953), Virginia Beach, VA, 9/29-10/1, "Shifty" Shifflette, (540) 434-2066, captshifty@ comcast.net; VMFA-232 "Red Devils" (1968-1970), Fredricksburg, TX, 8/3-5, Gus Fitch, (803) 649-6466, pncfzfn@gmail.com

NAVY

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LIFE MEMBERSHIPS

Post 42, CA: Noah D. Wood Post 310, CA: Colin L. Powell, Dennis Smith

COMRADES IN DISTRESS

RVAH-5 Ranger CV 61 WestPac Cruise (July-Dec 1964). Donald C. Frederking seeks witnesses to verify he may have been exposed to Agent Orange while deployed off the carrier to repair an airplane at an air base in Vietnam, CID 1509

IN SEARCH OF

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3rd Bn 17th FA SI Sect (Nurnberg, Germany, 1968-1969), Sam Shipley, (423) 542-3232

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1968), Barry Taylor, (908) 644-8932

Plt 355 (Parris Island, SC, July-Oct 1965), Barry Taylor, (908) 644-8932 USMC Sub Unit 1 (Naval Hosp Philadelphia,

TAPS

Gary G. Albers, Dept. of Nebraska. Dept. Cmdr. 1997-1998, Nat'l Americanism Cncl. Vice Chmn. 2001-2006, and Nat'l Distinguished Guests Cmte. Vice Chmn. 1988-1989 and 1998-2001.

Mark A. Cooper, Dept. of Oregon. Dept. Cmdr. 1991-1992, Nat'l Distinguished Guests Cmte. Vice Chmn. 1989-1991 and Nat'l Public Relations Cmsn. Memb. 1992-2003.

Helen G. Jacob, Dept. of New York. Nat'l Americanism Cncl. Vice Chmn. 1981-1982, Nat'l Distinguished Guests Cmte. Vice Chmn. 2008-2011 and Nat'l Veterans Affairs & Rehab. Cmsn. Nat'l Cmdr.'s Rep. 2002-2008.

Tommy Mills, Dept. of Mississippi. Dept. Cmdr. 1971-1972, Nat'l Exec. Cmte. Alt. Memb. 1990-1994, Nat'l Citizens Flag Alliance Dept. Chmn. 1994-1996, Nat'l Veterans Employment & Education Cmsn. Memb. 1968-1978, Nat'l Foreign Relations Cncl. Vice Chmn. 1984-1988 and 1991-1997, Nat'l Historian 1997-1998 and Nat'l Legis. Cmsn. Memb. 1998-2004.

Dennis E. Navratil, Dept. of Nebraska. Dept. Cmdr. 1990-1991 and Nat'l Distinguished Guests Cmte. Vice Chmn. 1991-1992.

Henry J. Sacha, Dept. of Michigan. Dept. Cmdr. 1993-1994, Nat'l Exec. Cmte. Alt. Memb. 1997-1999, Nat'l Americanism Cncl. Vice Chmn. 1979-1980, 1996-1999 and 2001-2005, Nat'l Conv. Cmsn. Liaison Cmte. Memb. 1999-2001 and Nat'l Exec. Cmte. Memb. 1999-2001.

Marjorie T. Simpson, Dept. of Georgia. Dept. Cmdr. 1994-1995, Nat'l Distinguished Guests Cmte. Vice Chmn. 1988-1989 and 1995, Nat'l Historian 1993-1994, Nat'l Trophies, Awards & Ceremonials Cmte. Memb. 1995-1997 and Nat'l Veterans Pref. Cmte. Memb. 1989-1993.

Carroll E. Wegner, Dept. of Iowa. Dept. Cmdr. 1996-1997, Nat'l Americanism Cncl. Vice Chmn. 1988-1989, Nat'l Citizens Flag Alliance Dept. Chmn. 1994-2003, Nat'l Merchant Marine Cmte. Memb. 1989-1996 and Nat'l Sec. Cmsn. Memb. 1997-2010.

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"I don't know, myself," the young man replied. "My mother says it's to fit me for the presidency; my uncle, to sow my wild oats; my sister, to find a chum for her to marry; and my father, to bankrupt the family."

AN OUT-OF-TOWNER drove his car into a ditch in a sparsely populated area. Fortunately, a local farmer came to help with his big strong horse, Buddy. He hitched Buddy up to the car and yelled, "Pull, Nellie, pull!" Buddy didn't move.

Then the farmer hollered, "Pull, Buster, pull!" Buddy didn't respond.

Once more, the farmer commanded, "Pull, Coco, pull!" Nothing.

Then the farmer nonchalantly said, "Pull, Buddy, pull!" And the horse easily dragged the car out of the ditch.

The motorist thanked the farmer, then asked why he'd called his horse by the wrong name three times.

The farmer said, "Oh, Buddy is blind, and if he thought he was the only one pulling, he wouldn't even try."



"Looks like that thing that's going around finally got around to you."



"It was their idea to make you breakfast in bed."



"I won't be coming in on Thursday, so reschedule all my appointments for then."

A CANDIDATE who had just lost an election announced disconsolately, "I thought sure I heard the voice of the people calling me."

Someone in the crowd yelled, "You must have been thinking out loud."

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